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COUNTY BOROUGH OF PRESTON.

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TROPICAL DISEASES

REPORT

OF THE

Medical Officer of Health

on the Health of the Borough
for the year

1934.

PRESTON:
R. SEED & SONS, Printers, 43 Guildhall Street.
1935.

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ANNUAL REPORT, 1934.

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& TROPICAL DISEASE

HEALTH COMMITTEE, 1934-35.

The Right Worshipful the Mayor (Mr. Councillor R. C. Handley, J.P.).
Chairman : Mr. Alderman Richard Durham.
Vice-Chairman : Mr. Councillor C. W. Beetham, L.D.S.

Mr. Alderman J. Herbert.
Mr. Alderman F. W. Collinson, F.R.C.S.
Mr. Alderman T. C. Rainford.
Mrs. Alderman A. M. Pimblett, J.P.
Mr. Councillor R. C. Pye.
Mr. Councillor J. Hopkinson.
Mr. Councillor R. N. Hull.
Mrs. Councillor A. Rainford.
Mr. Councillor W. T. Ferris.
Mr. Councillor W. S. Coates.
Mr. Councillor L. Birch.
Mr. Councillor J. Rowcroft.
Mr. Councillor L. A. Roberts.
Mr. Councillor E. Parry.

MATERNITY AND CHILD WELFARE COMMITTEE.

Chairman : Mrs. Councillor A. Rainford.

The Health Committee, with the following ladies adopted as Members :—

Mrs. Dunbar, J.P.
Mrs. Marsden, J.P.
Mrs. Todd, J.P.
Mrs. C. White.
Mrs. Lees.
Mrs. H. White.
Mrs. Barwick.

HOSPITALS SUB-COMMITTEE.

Chairman : Mr. Councillor R. N. Hull.

The Mayor
(Mr. Councillor R. C. Handley, J.P).
Mr. Alderman R. Durham.
Mrs. Alderman A. M. Pimblett.
Mr. Alderman J. Herbert.
Mr. Alderman T. C. Rainford.
Mr. Councillor C. W. Beetham.
Mr. Councillor E. Parry.
Mrs. Councillor A. Rainford.

THE MEDICAL SERVICE SUB-COMMITTEE OF THE EDUCATION COMMITTEE :

November, 1934.

Chairman : Mr. Alderman R. Durham.
Vice-Chairman : Mrs. Alderman A. M. Pimblett, J.P.

Mr. Alderman T. C. Rainford.
Mr. Councillor F. Jamieson.
Mr. Councillor R. C. Pye.
Mr. Councillor O. A. Goodier.
Mrs. Councillor A. Rainford.
Mr. J. Yates.
Mr. W. J. Heal.
Miss C. E. McCourty.
Mrs. Woodcock.
Rev. R. F. G. Wyatt.

The Annual Report of the Medical Officer of Health.

INTRODUCTION.

In the following pages is attempted a survey of the health conditions of the Borough during 1934. There has been little to disturb the even tenor of our ways: no catastrophic epidemic, no adverse weather conditions and no violent fluctuations in the social conditions, particularly in employment of the people, have to be recorded. The subject nearest our hearts is the means of subsistence of the people, and I would direct attention to reports on outdoor relief, the industrial situation and National Health Insurance, kindly provided by Mr. Bentham, Public Assistance Officer, Mr. Tarrant, Employment Exchange Officer, and Mr. Dearnley, Clerk to the National Health Insurance Committee. These officials are able to provide us with a large-scale view of present-day social conditions:—

Briefly, the improvement in employment noted in the Spring of 1934 was not maintained. The position grew definitely worse during the Winter and Spring of 1935. There is no break in the decline of employment in the cotton trade. The building trade has absorbed all the available skilled men, but not building labourers, while engineering and coach-building show comparatively encouraging features. Activities, educational and recreational, provided for the unemployed are worthy of note.

A reference to the statistical tables will show that the population is estimated to be practically stationary. There has been a further slight fall in the birth-rate which has reached a new low record. The corrected death-rate is higher than for some years and is higher than the birth-rate. This phenomenon, recorded for the first time in our Public Health history, is a feature of a population whose average age is rising and whose birth-rate is falling. In that part of the report dealing with infectious diseases, reference is made to an outbreak of Measles in the Spring, and of Diphtheria in the Autumn of 1934. Measles is a disease which in epidemic form requires a large number of hospital beds available for a comparatively short period. It is our experience that in the case of children suffering from Measles, with a complication such as Broncho Pneumonia, associated with poor home conditions, hospital treatment has a high value and requires consideration.

An examination of the figures concerning patients and their attendance at the Venereal Diseases Clinic shows that no great headway has been made. The numbers for the past three years have a remarkable similarity. The technique of the treatment of Gonorrhœa has been improved. With the noticeable decrease in alcoholism, especially in young people, and the equally notable increase in the practice of outdoor sports, one might have anticipated a large scale reduction in the incidence of Venereal Diseases; but it is very probable that the loosening of moral standards, the difficulty young people experience in obtaining houses and employment, are tending to postpone marriage and thus increase promiscuity and disease.

The Maternity and Child Welfare movement has to record with regret the retirement of Alderman Mrs. A. M. Pimblett from the Chairmanship which she held since November, 1923. This retirement was enforced by reason of the pressure of a great volume of public business, particularly by her elevation to the Chairmanship of the Education Committee. We shall miss her inspiring leadership and devotion to the cause, although the latter will still be available to us as she remains a member of the Committee. We welcome Councillor Mrs. A. Rainford as Chairman. She has served a long and stern novitiate as a voluntary worker, and her enthusiasm and knowledge of the work will stand her in good stead in the difficult task she has undertaken.

Dr. Critchley retired from her position as Assistant Medical Officer on her marriage. We wish her well and welcome Dr. Cliff, well known to us as Assistant School Medical Officer, who has been appointed in her stead. This appointment is a happy one as it links up the two services and renders their co-operation more intimate and effective.

The statistical aspect of the work is not without interest. The Infant Mortality reached the record low figure of 69. The improvement however concerns only children over one month old, as the figures for those in the first week and month of life are no better than they have been at any time in the last 20 years. Over one half of the deaths took place among children under one month of age, and more than half the deaths were due to conditions that come under the headings of congenital malformation and premature birth: i.e. in these cases morbid conditions exist before birth and render separate life of the infant impossible. Such conditions cannot of course, be alleviated by visits of a health visitor, but some of them may be and are discovered by ante-natal supervision; and as pregnancy becomes increasingly supervised, these adverse conditions will be proportionately reduced and will finally become non-effective. Pre-natal conditions antagonistic to the survival of the newly-born infant are also productive of a great deal of illness and death among mothers. In view of the public interest in maternal mortality and the intense efforts put forth on behalf of mothers before and after confinement, the high mortality among Preston women during 1934 is very disquieting. The Committee's schemes do not pretend to be in their final shape, but we do lay claim to have done everything possible as regards material assistance, that is to say, by the provision of doctors, midwives, lying-in beds, ante-natal centres, home helps, dinners, milk and publicity to make maternity " safe for democracy." The death-rate, which is twice as high as the average for many years, is mainly increased in that group of deaths included under the heading " Other accidents and diseases of pregnancy." Sad examples are the development of acute kidney deficiency late in pregnancy, failure to seek or accept medical advice as to a suitable mode of life before confinement or treatment during it, failure in judgment or technique on the part of the attendants, the bearing of children by women obviously unfit and, not least, a sapping of courage and will to endure on the part of the mother-to-be. The effect of a falling birth-rate, with a consequent rise in the proportion of first births, has a high importance. Not less important is the anxiety state induced by the prolonged industrial depression, while the evil effects of abortion whether self-induced or at the hands of an abortionist must not be overlooked. The lavish provision of maternity beds will not in itself suffice to remove this unduly high mortality. Few towns have a better service in this respect than we have here. We cannot hope for 100% survival in child-bearing; but by perfecting organisation, by more thoughtful midwifery and by the thorough-going co-operation of all parties concerned we can confidently hope to make a material improvement on the present percentage.

Urban life is not possible until the community has provided for itself certain basic essentials—roads, water, drainage, sewerage and refuse removal. These items are grouped in Section II of the report and, as they work in a satisfactory manner, need no further comment. Housing engages the continuous attention of two Committees of the Council—one Committee builds while the other demolishes. Stalemate is avoided by the greater energy of the former. It is an astonishing thing that with a stationary population and a nett gain of some 5,000 houses since the war, the demand for houses should be unabated, and that with the demand so acute there should, on a given date, be over 200 unoccupied houses.

The influence of the falling birth-rate and of the restricted size of the family on the demand for houses in the next 15 or 20 years has been a subject discussed at dozens of conferences. At the present time we must content ourselves with the knowledge that there are a few hundred people who would like to live in a house but are perforce living in furnished rooms, that there are hundreds of worn-out little houses offering a family living-room, scullery and two bedrooms, and of equally worn-out houses offering parlour, living-room, scullery, with three bedrooms. These houses have no bath-room, no hot-water system and no food-store. Behind rotting woodwork, in the cracks of defective plasterwork and in the interstices of furniture lurks an army of Cimex Lectularius, an insect commonly known as the bed-bug, with an unpleasant smell and nocturnal habit of blood-sucking.

These houses are lived and died in by cheerful, merry people—so it must be supposed that it is good for them.

We require a vastly different conception of what is due to a civilised community before a really large scale housing improvement can take place. I would as a contrast call attention to the standard set by the Education Committee in their magnificent new schools, by the Housing Committee in the provision of new houses, and by business firms in the provision of new offices and shops.

We have to record with regret the retirement of Mr. Alderman Durham from the Chairmanship of the Hospitals Sub-Committee. Mr. Durham has held this position since the formation of the Committee. It is due to his foresight and pertinacity that we were able to carry through the building of the Chestnuts Sanatorium, the extension of the Nurses' home, and the extensive alterations to the laundry at the Isolation Hospital. More recently, the appropriation of Sharoe Green Hospital for public health purposes and the many necessary alterations and improvements required to make the separate administration of the hospital possible, have made too great a demand on his time and strength.

Mr. Councillor Hull, the new Chairman, is welcomed as a competent man to a difficult post.

The trend of hospital development is of great interest. Before the passing of the Local Government Act of 1929, the care of patients suffering from acute conditions requiring specialised personnel and equipment was undertaken by voluntary hospitals. The treatment of cases of infectious diseases and tuberculosis was carried out by Local Authorities, and the destitute sick were treated in the infirmary wards of Poor Law Institutions.

The Local Government Act, however, made possible great changes. In Preston, the Council " appropriated " the Sharoe Green Hospital for Public Health purposes, and have spent much time and money in bringing it up to modern requirements. The Hospital can now, in addition to its statutory duty of undertaking the care of the sick poor, admit cases of diseases which do not require so elaborate a technique as those usually admitted to the Royal Infirmary. It also admits cases, hitherto not catered for, of diseases which require prolonged medical and nursing care. There can be no doubt that there was a definite loss to the community and an unnecessarily prolonged period of suffering for the individual by incomplete organisation of hospital provision in this respect.

A definition of the Royal Infirmary and of the Sharoe Green Hospital as places for the treatment of acute and chronic sickness respectively would, however, be inaccurate. Medical cases are received in large numbers by the Infirmary, and the exigencies of a waiting list frequently call for the admission of acute surgical cases to Sharoe Green. Both hospitals deal with maternity cases, and in general their interests cross and re-cross at innumerable points.

I am speaking for the people of Preston in saying that any idea of competition between the hospitals is wholly repugnant. The Royal Infirmary and all it stands for—a deep expression of true charity—could never be replaced in the people's affection by an institution maintained out of the rates; but charity and the Workpeople's Contribution Fund (a self-imposed tax) are limited and even contracted in times of industrial depression, and this is where the supplementing and correlating function of the Borough hospital comes into operation. The Committee have applied themselves to, and will continue in the furtherance of, schemes of improvement in buildings, equipment and personnel of their own hospital. The large problem, an urgent one, is the utilisation of hospital accommodation both voluntary and rate-provided in such a manner as best to serve the interests of the public.

Features calling for comment in the section relating to the work of the School Medical Service are, firstly, the steady infiltration of our work into other departments besides the elementary schools. For some years we have been inspecting secondary schools; we are now performing the same function in the Technical School, and in the Junior Instruction Centres a small beginning is being made. I do not consider that we do enough treatment in secondary schools. Often enough the sending of a child to a secondary school means an additional burden on the family, and the provision of free treatment for defective vision, enlarged tonsils or minor ailments should not be limited to cases where poverty is pleaded.

I am glad to be able to see the beginning of building operations for the new Open Air School. Our results with the old wooden buildings have been very encouraging, but with real open air treatment in adequately planned buildings we shall be able to achieve an even higher standard of work.

I hope to be able to report in the near future on children suffering from a high degree of myopia or short sight. These children are under a big handicap, and their efforts to learn with the books, instruments and syllabus of the ordinary child too frequently result in failure and in blindness in later life.

The work of the various clinics continues on a satisfactory level. The orthopædic clinic has produced some wonderful correction of deformities and disabilities. The restricted dental scheme is working well and has been able to take in the new group of entrants and still cover the ground within the year.

In writing this report I am very sensible of assistance given and the consideration shown to me by members of the Council, my colleagues and members of the staff.

F. A. SHARPE.

Municipal Building,
Preston, August, 1935.

Cost of Services.

The following figures as to the cost of the Health Services are summarised from the annual report of the Borough Treasurer for the year ended March 31st, 1934 :—

	Expenditure			Income		
	£	s.	d.	£	s.	d.
Maternity and Child Welfare	7856	16	11	605	2	9
Meat Inspection	1134	2	2	117	17	0
Public Health	7757	15	10	1777	17	9
Disinfecting	643	11	11	227	12	1
Vaccination	314	11	4	0	8	7
Port Sanitary	529	0	3	106	17	7
Elswick Hospital	1057	17	0	17	10	0
Isolation Hospital	6413	18	9	326	9	8
Sharoe Green Hospital	16512	14	2	5678	11	3
Venereal Diseases	2245	3	11	790	18	7
Treatment of Tuberculosis	9386	2	1	182	14	2
Contagious Diseases of Animals	252	14	8	...		
Food and Drugs Act	434	7	1	...		
Housing of Working Classes	47	12	7	...		
Medical Inspection and Treatment (Elem. Education)	6211	3	8	614	17	6
Medical Inspection (Higher Education)	260	0	0	...		
TOTAL	61057	12	4	10446	16	11

The figures include the grant from the Ministry of Health with regard to Port Sanitation.

The totals for the previous two years were as follows :—

Year ending March 31st, 1932 :—
Expenditure—£44,365 4s. 0d. Income—£5,526 16s. 10d.

Year ending March 31st, 1933 :—
Expenditure—£44,223 7s. 10d. Income—£4,787 15s. 2d.

The figures for 1932 and 1933 do not include Sharoe Green Hospital.

I.—Statistics and Social Conditions of the District.

Area ... ... 5,757 acres.

Population (mid 1934) ... ... 117,490.

Summary of Social and Vital Statistics.

	1930-31	1931-32	1932-33	1933-34	1934-35
Rateable Value	£630,224	£628,789	£631,224	£637,371	£682,099
Sum represented by a penny rate	£2,400	£2,460	£2,440	£2,450	£2,590
	s. d.	s. d.	s. d.	s. d.	s. d.
Total Rates levied ...	12 6	12 6	12 6	12 6	12 3
Rate for Public Health	1 3¾	1 5⅞	1 9⅝	1 11⅛	1 11
,, Highways ...	1 10⅛	1 8½	1 8¼	1 7¼	1 6⅛
,, Scavenging ...	0 5⅜	0 5⅜	0 5½	0 5¼	0 4⅞
,, House Refuse...	0 8¼	0 8½	0 8	0 7¾	0 7¾
,, Sewerage ...	0 8⅜	0 9¼	0 10⅛	0 11	0 9⅝

	Total	Males	Females	Birth Rate
Live Births—Legitimate	1587	825	762	13.53
Illegitimate ...	83	47	36	0.71

No. of Still Births ... 104 Rate per 1,000 Total Births 59

Deaths—Nett ... 1,611 Rate (corrected) per 1,000 population...15.24

Percentage of Total Deaths occurring in Public Institutions 34·55

Number of Marriages—1061. Marriage Rate—9.05.

Number of women dying in, or in consequence of, child birth :—
From Sepsis—6. From other causes—14.

Deaths of infants under one year of age per 1,000 births :—
Legitimate—67. Illegitimate—108. Total—69.

Deaths from Measles at all ages	26
,, Whooping Cough	3
,, Diarrhoea (under two years)	7

1. Public Health Officers of the Authority.

(a) MEDICAL.

Medical Officer of Health, School Medical Officer, Port Medical Officer, Tuberculosis Officer	F. A. Sharpe, M.D. (LOND.), B.S., D.P.H.
Deputy Medical Officer of Health, Clinical Tuberculosis Officer	J. Walker, M.B., CH.B., D.P.H. (VICT.).
Assistant School Medical Officers ...	M. E. Cliff, M.D., CH.B. (MANCH.), D.P.H. (LOND.) (transferred to M. and and C.W. Dept. 17th July, 1934). J. Maddison, M.D., B.S. (DURH.), D.P.H. (resigned 27th May, 1934). H. Craig, L.R.C.S. & P., L.R.E.P.S. (app. 28th May, 1934). M. A. Glass, M.B., CH.B., B.SC., D.P.H. (app. 1st Oct., 1934).
Dental Surgeons	J. C. Knowles, L.D.S. W. A. Lilley, L.D.S., B.D.S. (resigned 30th June, 1934). G. Williams, L.D.S. S. W. Gee, L.D.S. (app. 2nd July, 1934.
(Honorary)	A. Berry, L.D.S.
Assistant Medical Officer for Maternity and Child Welfare	E. E. Critchley, M.B., CH.B. (EDIN.). (resigned 17th July, 1934). M. E. Cliff, M.D., CH.B. (MANCH.), D.P.H. (LOND.) (app. 18th July, 1934).
Ophthalmic Surgeon ... (Part-time)	Walter Sykes, M.R.C.S., L.R.C.P.
Orthopædic Surgeon ... (Part-time)	B. L. McFarland, F.R.C.S. (ENG.). E. C. Bell Jones, M.B., B.S. (MELBOURNE), F.R.C.S. (ENG.), M.CH. ORTH. (L'POOL).
Venereal Diseases Officer ... (Part-time)	W. H. Pimblett, M.B., C.M. (EDIN.). Preston Royal Infirmary.
Pathologist ... ... (Part-time)	F. B. Smith, M.C., M.A., M.D., B.CH. (CANTAB.), Preston Royal Infirmary.
Medical Superintendent, Sharoe Green Hospital	W. N. Chisholm, M.B., CH.B., F.R.C.S. (EDIN.), D.C.O.G.
District Medical Officers and Public Vaccinators ... ... (Part-time)	D. J. Davies, M.B., B.S. (LOND.), B.SC. (WALES), F.R.C.S. (EDIN.). T. Pimley, M.B., C.M. (ABERD.). M. W. Talbot, M.B., C.M. (EDIN.). W. Ainsley, L.R.C.P., L.R.C.S. (EDIN.), L.R.F.P.S. (GLAS.). G. W. Pimblett, M.B., CH.B. (CANTAB.), M.R.C.S., L.R.C.P.

(b) OTHERS.

Veterinary Officer	Richard Finch, M.C., F.R.C.V.S., D.V.S.M.
Borough Analyst (Part-time)	W. H. Roberts, F.I.C.
Sanitary Inspectors	E. L. Crossthwaite* (retired 31st January, 1934), J. B. Morgan,** J. B. Cook,* T. Lindsay,** W. E. Weir**† (resigned 8th Sept., 1934), E. Owen** (resigned 2nd August, 1934), R. Hilton** (appointed 1st February, resigned 3rd November, 1934), R. Fairclough* (appointed 29th October, 1934), J. S. Carrie* (appointed 1st November, 1934), C. V. Smith* (appointed 5th November, 1934).
For Food	W. R. White,**
Port Sanitary	H. S. Holden.*
Vaccination Officer	H. Smith.
Health Visitors, School Nurses, and Tuberculosis Nurses	M. M. Bottomley, E. A. Cooper, L. Ross (resigned 30th Nov., 1934), E. Park, D. Lafferty, J. Mortimer, R. Cole, F. P. Harrop, G. Spencer (Masseuse), A. Butterfield, D. G. King, G. Whalley, M. E. Booth, E. B. Pilkington, G. Downing.
Matron, Infectious Diseases Hospital	C. La Motte.
Matron, Chestnuts Sanatorium	F. Keene.
Matron, Sharoe Green Hospital	M. Blundell.
Chief Clerk	W. Sharp.
Clerical Staff	H. Beggs, F. Garlington, R. Harrison, C. Blakeley, H. Barton, E. Worth, R. H. Bridge, M. Barnett, T. Gray, D. Pendlebury, V. Bateson, I. Knowles, I. Pinder, G. Alker, T. Rimmer, D. J. Harrison, M. Crook and L. D. Moore.

*Denotes holder of Certificate of the Royal Sanitary Institute.

**Also Certificate of the Royal Sanitary Institute for Meat and other foods.

† ,, Smoke Inspector's Certificate of the R.S.I.

2. Nursing in the Home.

(a) General.

The Council contributes £200 per annum to the Preston District Nursing Association, and is represented on the committee of management. The Association is organised into ward committees. The Provident Scheme provides a substantial portion of the revenue. The work during 1934 showed a large increase over that done in 1933. The organisation is well supported and is increasing its scope of usefulness and service. In addition to the above Association, the Roman Catholic Church maintains five nursing sisters, members of religious orders, in the Moorfields Convent, and a similar number in a Home in Moor Park Avenue. Most of these nurses are fully trained; their duties include not only nursing, but such other domestic duties as may arise.

(b) Infectious Diseases.

The Preston District Nursing Association undertakes the nursing of measles, whooping cough, pneumonia, and other cases of infectious disease not usually treated at the Isolation Hospital.

3. Midwives Practising in the Area.

Number of persons with the Certificate of the Central Midwives Board	32
Number of bona-fide midwives (in practice in 1902)	8

The Local Authority does not employ any midwife direct, and no midwives are employed on a salaried basis by the Authority. The Maternity and Child Welfare Committee, under the Maternity and Child Welfare scheme, consider applications for the free or partly free services of midwives. They also arrange to compensate midwives in those instances where a midwife's case is recommended for admission to a maternity home.

4. National Health Insurance.

Mr. Irvine R. Dearnley, Secretary of the Preston Insurance Committee, has kindly supplied the following information :—

The continued decline in the number of insured persons in the Borough entitled to medical benefit is a reflex of the prevailing unemployment. On the 31st December, 1934, there were 56,708 insured persons entitled to medical benefit, 56,173 being members of Approved Societies and the remaining 535 members of the Deposit Contributors' Fund—a decrease of 1,457 on the number at the corresponding date in 1933.

The number of prescriptions issued for 1934 (286,760) disclosed a decrease of 20,166 on the year 1933. The heaviest month during 1934 was January, when 28,094 prescriptions were issued. There was also a slight decrease in the average number of prescriptions issued per insured person, the figure for 1934 being 5.3, as compared with 5.5 for the year 1933.

The total Drug Bill for 1934 was £9,802 11s. 10d., and the average cost per insured person was 3s. 7.3d. Other years' figures are: 1933, 3s. 10.1d.; 1932, 3s. 6.8d.; 1931, 3s. 7.5d.; and 1930, 3s. 6.5d.

During 1934 doctors suffered an economy deduction of 10% during the first half of the year and a 5% deduction during the second half of the year. The chemists had similar deductions from their dispensing fees, and the amount of the total drug bill quoted above is prior to any deductions being made.

Under the scheme for testing medicines and appliances, 14 tests were taken at different chemists' establishments in the Borough and reported on by an independent analyst. Three cases were referred to the Pharmaceutical Service Sub-Committee for further investigation, and in two of the cases the chemists were cautioned. In the remaining test a small penalty was imposed by the Ministry of Health.

The arrangements were continued with the Preston Royal Infirmary whereby the services of the Pathological Laboratory are placed at the disposal of the Insurance Doctors for examinations and reports. During a twelve months period (21st June, 1933, and 30th June, 1934) 75 patients were referred to this Department and 138 reports received. Twenty-eight insurance practitioners made use of the services of the Laboratory under this scheme.

Including assistants and the resident doctor of the Preston Friendly Societies' Medical Association, there were 59 doctors on the Insurance Committee's list on the 31st December, 1934, an increase of one over the previous year. At the same date there were 44 chemists' establishments in the Borough undertaking Insurance dispensing, as compared with 42 at the end of 1933.

A comparative table covering the years 1927-34, showing the population, the number of insured persons, and the number of prescriptions issued, is useful information, and is given below :—

Year.	Estimated Population.	Insured Persons.	No. of Prescriptions Issued.
1927	127,100	59,155	324,636
1928	127,100	59,437	307,583
1929	126,100	58,882	297,467
1930	126,100	59,833	280,924
1931	119.001	59,898	294,131
1932	119,001	59,512	287,197
1933	119,001	58,165	306,926
1934	119,001	56,708	286,760

5. Poor Law Medical Out-Relief.

The duties of a District Medical Officer as laid down in the Public Assistance Order, 1930, and the Districts with the Medical Officers attached, were described in the report for 1931.

The Medical Officers paid 1,689 visits to patients in their homes, and held 2,277 consultations in their respective surgeries.

Poor Law Relief.

Mr. Thomas H. Bentham, Public Assistance Officer, has kindly supplied the following information :—

Outdoor relief paid in respect of the Borough :—

Year.	Amount. £	s.	d.
1921	12133	16	0
1922	11692	1	7
1923	4384	12	11
1924	7253	17	1
1925	9105	8	7
1926	12137	0	6
1927	11924	10	3
1928	11123	3	10
1929	9764	13	1
1930	7974	7	2
1931	10615	2	10
1932	16733	4	4
1934	29321	3	8

6. Laboratory Facilities.

Pathological examinations are carried out at the laboratory maintained at the Preston Royal Infirmary by the Board of that institution, in charge of Dr. F. B. Smith, Pathologist. A numerical summary of the work undertaken for the Preston Council is as follows :—

Specimen.	Examination carried out.	Number.
Swabs	For B. Diphtheriæ by culture	1236
,,	,, Hæmolytic Streptococci (added)	17
,,	,, Vincent's Angina (added)	14
,,	Test of Virulence of B. Diphtheriæ	10
Sputum	For B. Tuberculosis	587
,,	,, ,, (culture added)	2
Milks	For B. Tuberculosis	420
,,	,, ,, (microscopically only)	1
,,	,, B. Coli content	380
,,	,, ,, and total bacterial colonies	31
Pus	For Gonococcus (other than V.D. Department)	33
,,	,, ,, (add culture)	1
,,	,, general culture	12
,,	,, B. Tuberculosis	2
Urine	For general	2
,,	,, ,, (add culture)	1
,,	,, sugar and ketones only	1
,,	,, B. Tuberculosis and culture	2
Blood	For Agglutination	6
,,	,, Culture	4
,,	,, Count	1
Pleural fluid	For B. Tuberculosis and culture	3
Cerebro-spinal fluid	For General, culture and B. Tuberculosis	2
Hairs	For Ringworm spores	1
Tissues	For section	5
Shellfish	For B. Coli content (1 batch)	12
	Total	2817

One thousand seven hundred and eighty-three examinations were made for the V.D. Department, and are not included in the above figures.

7. Legislation in Force.

Local Acts, special Orders, general adoptive Acts, and Bye-Laws relating to the public health, in force in the area :—

Preston Markets Act, 1861.
Preston Improvement Acts, 1869 and 1880.
Preston Corporation Acts, 1900, 1914, 1921, 1929 and 1931.
Ribble Navigation and Preston Docks Acts, 1883, 1888, 1889, 1890, 1892, 1896 and 1905.
Preston Waterworks Acts, 1853 and 1904.
The Public Health Acts (Amendment Act), 1890. Part III.
The Public Health Acts (Amendment Act), 1907 :—
  Sections 15, 17, 19, 20, 21, 22, 23, 24, 26, 27, 28, 30, 31 and 33, Part II. (Streets and Buildings).
  Sections 34, 35, 36, 37, 38, 43, 44, 45, 46, 49, 50 and 51, Part III. (Sanitary Provision).
  Sections 53, 54, 56, 57, 59, 60, 62, 63, 64, 65, 66 and 68, Part IV. (Infectious Diseases).
  Part V. (Common Lodging Houses).
  Sections 79, 81, 85 and 86, Part VII.
  Part VIII.
  Sections 93 and 95, Part X. (Miscellaneous).
Infectious Diseases Prevention Act, 1890.
The Public Libraries Acts.
The Baths and Washhouses Acts.
Bye-Laws with respect to Nuisances, 24th February, 1914.
Bye-Laws with respect to New Streets and Buildings, 12th November, 1926.
Bye-Laws with respect to Houses Let in Lodgings, 12th March, 1929.
Bye-Laws with respect to Common Lodging Houses, revised 10th June, 1931.
Bye-Laws with respect to the Public Slaughterhouse, June, 1932.

8. Hospitals.

Preston Royal Infirmary.

The principal general hospital in the district is the Preston Royal Infirmary, a voluntary hospital of some 292 beds, with a convalescent home for men at "The Willows," Ashton (26 beds), and for women and children at Lostock Hall (46 beds); 364 beds in all. The hospital offers a complete range of service, is adequately equipped and fully staffed both by residents and non-residents and honorary medical officers. Mr. J. Gibson, Superintendent and Secretary of the Infirmary, has kindly supplied the following details :—

The number of in-patients treated during the year was 5,782, as against 5,925 in the previous year. The daily average number of beds occupied at the Infirmary was 259, compared with 255 in 1933, and the average length of stay 16.3 days.

Six hundred and eighty-three of the patients were transferred to the Lostock Hall Convalescent Hospital for women and children, where the average daily occupation of beds was 34.7, and the average stay of patients 18.4 days. Five hundred and eleven patients were also transferred to " The Willows " Convalescent Hospital for men in Pedder's Lane, Ashton-on-Ribble, where the daily occupation of beds was 22.6, and the average stay was 16.4 days each. Eighty-eight persons were sent for recuperative treatment to the Southport Convalescent Hospital and 24 to the Devonshire Hospital, Buxton, for treatment of rheumatic conditions.

In the Maternity Department 438 patients were confined and 448 babies were born.

Last year's record in the Out-Patients' Department has been exceeded :—30,803 patients were treated (an increase of 1,878), including 11,742 accident and casualty cases, 3,553 eye, ear, nose and throat, 2,676 surgical, 848 artificial sunlight, 421 pre-natal 936 pathological and 46 visited at home, 450 medical, 2,311 dental, 4,840 X-ray, 1,506 massage and electrical, 112 orthopædic, 114 radium, 58 mental and 1,230 venereal diseases.

The total expenditure of the Infirmary was £60,977 19s. 8d., of which £45,807 1s. 5d. represented ordinary maintenance and £16,170 18s. 3d. extensions, improvements and special equipment. The income was £65,163 11s. 7d.

The arrangement with the Christie Cancer Hospital and Holt Radium Institute, Manchester, whereby the Infirmary has the use of the radium belonging to and the services of the trained Radium Specialists attached to the joint hospitals, has proved a great boon to the unfortunate sufferers from malignant disease in this area, and has been extended by the addition of an extra examination clinic to deal with the increasing number of patients seeking treatment. The Examination Clinics are held on the first and third Thursday morning in each month, commencing at 10 a.m., and the operative sessions on the afternoons of those days.

Three hundred and seventy-one persons were treated as a result of motor traffic accidents. Of these, 158 were in-patients, who occupied beds for 4,738 days, or an average of 13 beds daily. The cost of treatment was £1,743 4s., towards which £979 8s. 5d. was recovered, leaving £763 15s. 7d. to be paid out of the general funds of the Institution.

A new Orthopædic Clinic was opened on the 1st September last under the direction of Mr. B. J. McFarland, F.R.C.S.I, M.Orth., of Liverpool, and is proving a most useful addition to the surgical services.

In the Nurses' Training School 20 Nurses passed the Final Examination and 20 the Preliminary Examination of the General Nursing Council. Twenty-one Pupil Midwives obtained the diploma of the Central Midwives Board, and four members of the X-ray Staff obtained the diploma of the Society of Radiographers.

The foundation stone of a New Maternity Hospital in the Infirmary grounds was laid during the year by Alderman Mrs A. M. Pimblett, J.P., and the new Hospital is expected to be opened in the Spring of 1936.

SHAROE GREEN HOSPITAL.

During the year there were 1,583 cases admitted, while 1,377 were discharged and 255 died. The corresponding figures for previous years are given :—

	1932	1933	1934
Admitted	1327	1407	1583
Discharged	1089	1150	1377
Died	258	268	255

There has been a noticeable increase in the number of persons suffering from short-stay illnesses and from acute medical complaints.

Fewer cases are being referred by relieving officers, the majority being sent direct by their private practitioners.

The Pathological and Bacteriological Examinations are carried out at the Preston Royal Infirmary by Dr. F. B. Smith, who has during the year examined 111 specimens, while 165 examinations were carried out by your medical staff.

The total number of operations performed of all classes was 124, as compared with 119 for 1933, and 68 for 1932.

Dental treatment was given by Mr. A. E. Berry to 147 persons, and of these 82 were hospital cases and 65 were cases from the Preston Institution.

Puerperal Sepsis Unit.

The work in this department continues, cases being admitted for treatment from Preston Borough and from the Health Department of the Lancashire County Council.

The cases are treated in an isolation ward in the hospital, and have a separate nursing staff.

During the year 23 cases were admitted after delivery from the following localities :—

Preston	13	Cleveleys ...	1
Chorley	1	Leyland	1
Morecambe ...	1	Farington ...	1
Balderstone ...	1	Fleetwood ...	4

There was one case in the hospital on the 1st January, 1934, and one remaining on the 31st December, 1934.

During the year 18 were discharged cured and five died.

In Table A are seen the number of different diseases dealt with during the year.

TABLE "A."

1934—Discharges and Deaths : 1,223.

		Discharges.	Deaths.
1.	Diseases caused by Infection or Infestation ...	79	5
2.	Diseases of the Nervous System :		
	(a) Nervous Disorders, Tumours, Hæmorrhage, Inflammations, etc.	91	37
	(b) Mental Diseases	52	—
3.	Diseases of the Eye	8	—
4.	Diseases of the Ear	3	—
5.	Diseases of the Nose	6	—
6.	Diseases of the Circulatory System	66	63
7.	Diseases of the Blood and Blood-forming Organs	13	4
8.	Diseases of Ductless or Endocrine Glands or Glands of Internal Secretion	2	3
9.	Diseases of the Breast	10	3
10.	Diseases of the Respiratory System	170	56
11.	Diseases of the Teeth and Gums	2	—
12.	Diseases of the Digestive System	103	31
13.	Diseases due to Disorders of Nutrition or Metabolism	27	4
14.	Diseases of the Generative System :		
	(a) Males	11	1
	(b) Females :		
	1. Associated with Pregnancy and Parturition	58	2
	2. Others	29	7
15.	Diseases of the Bones, Joints, Muscles, Fasciæ and Bursæ	28	1
16.	Diseases of the Areolar Tissue	56	5
17.	Diseases of the Skin	36	—
18.	Diseases of the Urinary Organs	23	8
19.	Injuries, General and Local	49	4
20.	Miscellaneous	64	3
		986	237

Maternity.

The work in the maternity department is steadily increasing, the proportion of first confinements to second and subsequent ones being 162 : 197.

During the year three mothers died following their confinements, giving a percentage of 0.775 of the admissions.

Maternal Deaths—Cause of Death.

(1) Uræmia. Chronic Nephritis. Pregnancy and A.P.H.
(2) Puerperal Peritonitis.
(3) Pulmonary Embolus. Femoral Thrombosis. Confinement.

The following summary of the work done during the year does not include abortions and miscarriages. Details of these appear in the table dealing with cases admitted to the general wards (see Table A, 14 B.1).

No. of Anæsthetics.

(1) For confinement	233
(2) For perineal repair or other manipulation	17
Total	250

TABLE "B."

Maternity Cases, 1934.

Admissions	387
Discharges	391
Number of Patients delivered	359
Normal Deliveries	287
Instrumental Deliveries	45
Drug Inductions	35
Tube Inductions	17
Queen Charlotte Bag	17
Cæsarean Section	14
Placenta Prævia	1
Craniotomy	1
Ante Partum Hæmorrhage	7
Post Partum Hæmorrhage	6
Anæsthetics	125
2nd Stage Anæsthetics	108

Breech deliveries (normal)	6
Breech deliveries (complicated)	4
Episiotomy	21
Ruptured Perineums	75
Manual Removal of Placenta	3
Born before arrival of Doctor or Nurse	4
Pyrexia (notified)	8
Pre-eclamptic Toxæmia (Albuminuria)	13
Patients :	
(1) Paying	217
(2) Assisted partially or wholly by an Authority	146
Patients discharged undelivered	25
Patients attended Clinic first time	312

Babies.

Born alive	333
Discharged	327
Still Born	30
Died (under 10 days)	14

Died (over 10 days)	2
Supplementary feeding	43
Artificial feeding	40

Ante-Natal.

Patients attended Clinic	296
Patients not attended Clinic	65

Ante-Natal attendances	1646
Average No. attendances per patient	5·56

Post-Natal.

No. of persons who attended : 202.

Ambulance Trips.

The hospital ambulance made 769 trips during the course of the year, 673 in the Borough and 96 in the County. This shows an increase of 137 trips compared with last year.

Staff.

The vacancy created by the resignation of Dr. O. Robertson, Senior Assistant Medical Officer, was filled by the promotion of Dr. M. F. Miller, Junior Assistant Medical Officer, and the latter's post was filled by Dr. Sutherland. On the resignation of Dr. Miller in August, her post was filled by Dr. A. B. Sutherland, and Dr. P. S. Warren was appointed Junior Assistant Medical Officer.

Sister L. Lovett was appointed Home Sister and Sister Tutor on the 1st November, on the appointment of Sister C. M. Parrey, Home Sister and Sister Tutor, to an Assistant Matronship.

The vacancy created by the resignation of Sister M. Heaton in April from the post of Night Sister was filled by the promotion of Sister A. Dickinson, Ward Sister. The latter's post was filled by the promotion of Staff Nurse Crossley, who had just secured the certificate of the Central Midwives Board. In June, Sister Stephenson was appointed Auxiliary Ward Sister in the Maternity Department.

During the course of the year 17 probationers were appointed.

Twelve Pupil Midwives were appointed and six completed their course of training.

The clergy of the various denominations, in addition to their routine visits to the sick, were ever ready at all times to pay emergency visits as required.

During the year various gifts have been received : Toys, eggs, pillows, sweets, magazines, fruit, flowers, vegetables, books, pram covers, holly, cakes, etc.

This opportunity is taken to offer our heartfelt thanks to the donors.

Probationers.

Instruction in hygiene, anatomy, physiology and practical nursing, etc., was given during the latter part of the year by Sister Lovett, and the course of systematic lectures in medicine and surgery was given by the Medical Superintendent.

Pupil Midwives.

As in the past, the approved course of lectures was given by Sister Renfrey and Dr. Pimley, while ante-natal instruction and supplementary lectures were given by the Medical Superintendent.

Examination Results.

	Passed.	Failed.
Preliminary State Examination	11	—
State Final Examination	2	1
Examination of the Central Midwives Board ...	9	3

On the 12th June, 1934, the new kitchen was opened and has been in full use ever since. The old kitchen has been gutted and is to become the dispensary. This work is in progress and should be completed early in the New Year.

Outside painting was carried out on the hospital block, this completing the whole of the outside painting.

Work has commenced (in the maternity block) converting the old kitchen premises and dining-room into a labour ward unit.

The lecture room has been re-decorated and the necessary equipment has been purchased, so that this department is now completely equipped and working satisfactorily.

Arrangements are in hand for the collection from patients and relatives of monies due in respect of maintenance.

It is intended to carry out this work at the hospital with the assistance of an extra junior clerk.

During the course of the year the Committee have considered plans for the improvement of the entrance, for additional accommodation in the nurses' home, and for the improvement of the sanitary annexes in the hospital. Schemes have also been considered for the re-wiring of the hospital lighting system.

It is hoped that the work on the entrance, the sanitary annexes and lighting system will be commenced during the coming year.

Owing to lack of accommodation in the nurses' home, the full complement of staff cannot be accommodated, and it is hoped that during the ensuing year the Committee will give this matter careful consideration in order that the necessary alterations may be commenced in the near future.

Effects of the Appropriation.

This is probably an opportune moment to express an opinion on the effects of the appropriation of the hospital by the Council.

In the first place, persons no longer requiring hospital treatment can be discharged, and the tendency to retain them to secure their services has been abolished. This fact is proved by referring to the figures for 1932-33, when the average stay in hospital was 35 days with 1,327 admissions; while in 1933 the average duration of stay was reduced to 26.5, when 1,407 cases were admitted. During 1934 the average stay has gone up to 31 days.

These figures still further reflect the effect the appropriation has had upon the general public.

Persons with short illnesses are now presenting themselves for treatment, whereas previously they would not have considered entering the "Workhouse Hospital."

There has also been a noticeable change in the character of the work, there now being a greater proportion of acute illness receiving treatment than ever before.

The number of operations performed remains about the same, but this is not surprising, as this class of illness is so adequately and efficiently catered for at the Royal Infirmary.

Another feature of the change-over has been the removal of the Poor Law restrictions, which have given the patients and all concerned a greater feeling of freedom.

The discontinuance of the Poor Law Dietary has also greatly enhanced the efficiency of the hospital in every respect, and with the opening of the new kitchen it is now possible to cater for the needs of all the patients in a manner which was not possible heretofore.

9. Maternity and Nursing Homes.

The following action has been taken by the Local Supervising Authority under the Nursing Homes Registration Act, 1927.

There were nine maternity and nursing homes in operation at the end of 1933, and there were no changes during the year. Two applications were made by the management of institutions, and exemptions granted, under Section 6 of the Act.

10. Maternal Mortality.

The enquiries instituted on behalf of the Maternal Mortality Committee set up by the Ministry of Health have been continued. Details of these inquiries are given in the Maternity and Child Welfare section of the report. Every notified case of puerperal fever and puerperal pyrexia is the subject of an enquiry.

11. Institutional provision for unmarried mothers, illegitimate infants and homeless children.

There is no provision for unmarried mothers other than that provided by the Public Assistance Committee. Illegitimate infants and homeless infants are maintained in the children's nursery in the Preston Institution up to the age of three years; and from over that age Roman Catholic children are maintained at the St. Vincent Orphanage for Boys and the Moorfield Convent for Girls; Protestant boys and girls are maintained at the Cottage Homes, Brockholes View. In September, 1931, the Council decided "that financial assistance granted by the Council to expectant mothers by way of the provision of maternity home accommodation, be granted solely through the Maternity and Child Welfare Committee."

12. Institutional Provision for Mental Defectives.

Educable children are provided for by the Education Committee. Children between seven and 16 years of age and educable and requiring institutional care are sent to Calderstones Certified Institution at Allerton Priory and at Pontville, Ormskirk. Idiots and imbeciles are dealt with by the Lancashire Mental Hospitals Committee. Male adult defectives are accommodated at the Ribchester Institution, and female defectives at the Preston Institution.

13. Ambulance facilities.

(a) An ambulance is maintained at the Isolation Hospital for the removal of cases of infectious disease.

(b) There is a service maintained at the Fire Station for accident cases and urgent removals to hospital; there is also an ambulance maintained at the Preston Royal Infirmary for conveyance of patients to and from the convalescent homes, and an ambulance at the Sharoe Green Hospital for the conveyance of patients into the hospital or to other institutions.

14. Clinics and Treatment Centres.

There are no out-patient departments under the control of the Local Authority. The various clinics and treatment centres were shown in the tabular statement in the report for 1930.

15. Local Government Act, 1929.

The administrative arrangements under the above Act were described in the report for 1930.

16. Blind Persons Act, 1920.

During the year 75 persons have been examined with a view to certification under the Blind Persons Act by Dr. Craig, Assistant School Medical Officer. Of these, 48 were found to be " so blind as to be unable to perform any work for which eyesight is essential." Of the remaining 27 examined, 17 are due for re-examination during 1935.

In order that all the information required by the Ministry of Health may be available, a very thorough examination is made of applicants for admission to the Blind Register. A second examination, or a consultant examination by a Medical Referee, is undertaken, where necessary, on an appeal.

Of the applicants examined during the year, the following represents the details of the analysis of the cause of blindness or defective vision.

A. Congenital and undetermined causes : 56 cases.	
Congenital, hereditary and developmental defects	6
Myopic error	11
Primary Glaucoma	4
Primary Cataract	26
Tumour	5
Others and Senility	4
B. Infectious and Bacterial : 29 cases.	
Ophthalmia Neonatorum	3
Syphilis, congenital	1
Syphilis, acquired	7
Local infection of coats of eye	9
Cerebro-Spinal Meningitis	1
Septicæmia, chronic; auto-toxic, focal sepsis	8
C. Traumatic and Chemical : 13 cases.	
Industria Trauma	3
Non-industrial Trauma	6
Non-industrial, War Trauma	2
Indirect : Sympathetic Ophthalmia	2
D. General Diseases : 15 cases.	
Blood and Vascular Diseases	5
Intracranial Neoplasm	1
Diabetes	5
Nephritis	1
Others	3

There were therefore 113 causes or factors contributing towards the blindness or defective vision of the 75 persons examined. This is explained by the fact that 26 persons suffered from more than one determining condition; secondly, the greater number of persons examined were found to fall under the first category; of these, the highest incidence of blindness was due to Cataract, but High Myopia was responsible for at least 11 cases. We have not to look very far back when the highest incidence would have come under the second category—Infectious and Bacterial—which testifies to the valuable results derived from preventive medicine in the treatment of syphilis and of ophthalmia neonatorum. This year only three cases of certifiable blindness could be traced to the ophthalmia of birth. It is likewise significant that there were only three cases of blindness in the Borough due to industrial trauma.

The state of affairs with regard to blindness in Preston now is :—

The number of certified blind persons is 346. This includes :—

Blind persons employed at approved workshops	32
Blind persons employed in their own homes	5
Blind persons employed elsewhere	3
Blind persons unemployable	292
Blind persons not training, but trainable	1
Blind children under 16 years of age	7
Blind trainees over 16 years of age	6
	346

Of these, 192 are receiving benefits from the Borough Council.

17. Industrial Situation—April, 1934, to March, 1935.

The unemployment position at the beginning of the period under review showed a substantial improvement as compared with the position at April, 1933, the number of persons registered as unemployed at the Employment Exchange being as follows :—

	April, 1934.	April, 1933.
Wholly unemployed	7,060	9,392
Temporarily suspended	2,317	2,585
Totals	9,377	11,977

This improvement was maintained during 1934 : that is to say, comparing the general level of unemployment in each month in 1934 with the corresponding month in 1933, an appreciable reduction was shown. Towards the end of 1934, however, the tendency was for the reduction to become smaller, and, following Christmas, the seasonal rise in unemployment was such as to bring the level almost up to that obtaining at the corresponding period in the previous year. This deterioration in the employment position has continued, and, at the end of the period under review, unemployment showed a definite increase as compared with the previous year, the figures being :—

	March, 1935.	March, 1934.
Wholly unemployed	7,855	7,800
Temporarily suspended	2,664	2,078
Totals	10,519	9,878

The fluctuations in unemployment during the year were caused mainly by temporary suspensions from work, but it is discouraging to observe that the register of wholly unemployed persons also shows an increase.

In the Cotton Trade unemployment was heavier than during the year ended March, 1934. Extended holidays were necessary at Easter, 1934, when approximately 3,500 workpeople were affected; and at Whitsuntide, 1934, when approximately 7,000 workpeople were affected. In addition to extended stoppages, sectional stoppages were fairly frequent, and during the summer period a figure of approximately 3,000 workpeople temporarily suspended was not uncommon. The rise in the register of persons wholly unemployed, referred to above, has been occasioned mainly by the closing down of cotton mills. During the year three mills closed down in the Preston district, and a total of approximately 500 workpeople were displaced.

The figures for March, 1935, and March, 1934, of unemployed persons normally engaged in the cotton trade were as follows :—

	March, 1935.	March, 1934.
Cotton Spinning	1,350	958
Cotton Manufacturing	3,068	2,410

In the Building Trades there was at March, 1935, a slight increase in the unemployed register as compared with March, 1934, but the employment throughout the year was fairly good. At times few skilled workers—other than joiners, who appear to have been displaced as the result of modern methods of production—were unemployed, and occasionally it was difficult to obtain sufficient plasterers and bricklayers. There was, however, always a large surplus of builder's labourers, whilst employment in the building trades was mainly in connection with maintenance work and with speculative house-building on the outskirts of the Borough. The comparative figures of unemployment were: March, 1935—663; March, 1934—647.

In the Engineering Trades the employment position showed a marked improvement. This was fairly general, but particular mention should be made of textile machinery makers, who were busier than for some time past. It is understood that a fair proportion of the work was for foreign markets, but the demand for home trade also improved. The comparative unemployment figures for engineering trades were: March, 1935—343; March, 1934—461.

In the Coach Building Trade a considerable improvement took place, and there was, throughout the year, fairly steady employment for large numbers of skilled workers. The unemployment figure at March, 1935, was 135, compared with 219 at March, 1934.

During the year the following engagements were made by employers through the medium of the Employment Exchange :—

	Placed in employment locally.		Placed in employment in other districts.
Men	4,306	...	568
Women	1,128	...	259

The number of persons placed in employment with local employers showed an increase of 703 compared with the previous year. It may be that this expansion of placing activity was in a measure due to increased opportunities, but there is no doubt that it was largely the result of greater use being made by employers of the facilities afforded by the Exchange.

Welfare work among the unemployed, organised by the Preston Council of Social Service, has continued. The Occupational Centre in North Road has become increasingly popular, and approximately 400 men availed themselves of the provisions made for them to undertake wood-work, cobbling, upholstery, wireless set construction, and other occupations in which they can usefully spend their enforced leisure time. Many unemployed men also took advantage of the arrangements made by the Director of Education for physical culture, including swimming, whilst the Unemployed Inter-Ward Football League continued its successful career and provided recreation and entertainment for large numbers of unemployed men. The Preston Unemployed Allotment Holders' Association was also active in looking after the interests of unemployed men with allotments. An innovation was the provision, under the auspices of the Council of Social Service, of physical training classes for unemployed women; and recently a needlework class has been instituted which has already proved popular.

The following statement shows the number of persons registered as unemployed at a date in each month during the year :—

	MEN.		WOMEN.		
1934.	Wholly Unemployed	Temporarily Suspended	Wholly Unemployed	Temporarily Suspended	TOTALS.
April	5,247	991	1,813	1,326	9,377
May	4,884	1,006	1,792	1,502	9,184
June	4,595	1,067	1,855	1,783	9,300
July	4,248	1,302	1,983	1,647	9,180
August ...	4,303	2,260	2,214	3,407	12,184
September ...	4,453	1,341	2,463	1,533	9,790
October ...	4,578	1,376	2,568	1,119	9,641
November ...	4,799	1,469	2,493	1,321	10,082
December ...	4,803	1,239	2,237	882	9,161
1935.					
January ...	5,281	1,715	2,568	1,283	10,847
February ...	5,887	1,148	2,516	1,159	10,710
March ...	5,384	1,500	2,471	1,164	10,519

(NOTE.—The figures under the heading "Temporarily Suspended" relate to persons who are "stood off" by their usual employers with a definite prospect of resuming work within the ensuing six weeks.)

Unemployment.

The following statement shows the number of persons on the Exchange registers at a date in December of each year from 1924 :—

1924	2,595	910	41	29	3,575
1925	2,479	710	77	64	3,330
1926	5,068	6,302	136	141	11,647
1927	2,788	1,829	127	111	4,855
1928	4,580	2,446	—	—	7,026
1929	5,322	5,805	213	219	11,559
1930	8,516	8,409	222	309	17,456
1931	7,421	4,048	306	350	12,125
1932	7,963	3,297	302	265	11,827
1933	6,635	3,087	216	206	10,144
1934	6,042	3,119	170	125	9,456

The Director of Education has supplied me with the following figures relating to Juvenile Unemployment :—

1934.	Boys.	Girls.
March	142	99
April	226	160
May	125	144
June	95	196
July	227	305
August	286	352
September	200	242
October	183	208
November	161	181
December	274	334
1935.		
January	286	370
February	172	249

Propaganda.

In addition to the course of systematic lectures and demonstrations given to the midwives, addresses were given to various Societies as follows :—

Medical Officer of Health—

- Housing.
- New Developments in Public Health.

Dr. Maddison—

- Welfare of Transport Workers.
- Food Values.
- Industrial Skin Diseases.

APPENDIX
TO
SECTION I.

TABLE IA.

WARD	Census 1931	Estimated Population, June, 1934	Nett Deaths	Rate per 1000 living	Births	Rate per 1000 living	Deaths of Infants	Infant Mortality per 1000 born
St. John's ...	11498	11348	173	15.24	155	13.66	13	84
Avenham	7242	7135	94	13.17	89	12.47	6	67
Christ Church	7095	6993	99	14.16	106	15.16	6	57
Ashton ...	9343	9215	112	12.15	98	10.64	5	51
Maudland ...	10501	10363	136	13.25	134	12.93	9	67
St. Peter's ...	10022	9890	139	14.05	137	13.85	9	66
Moorbrook ...	7852	7743	104	13.43	103	13.30	9	88
Park	13111	12938	185	14.29	174	13.45	8	46
Trinity	8645	8512	144	16.92	129	15.15	12	93
Deepdale ...	13774	13635	176	12.91	235	17.24	14	59
Ribbleton ...	10392	10328	155	15.01	147	14.23	17	116
Fishwick ...	9526	9390	94	10.01	123	13.10	7	57
Unknown ...	...	...	...	...	...	...	...	... .
	119001	117490	1611	15.24	1670	14.24	115	69

TABLE IB.

Year.	No. of Births.	Rate per 1000 Living.	No. of Infant Deaths.	Infant Mortality.	No. of Deaths at all ages	Rate per 1000 Living.
Average 1906-1910	3118	26.37	506	161	1904	16.11
Average 1911-1915	2751	23.21	415	151	1992	17.02
Average 1916-1920	2262	18.85	250	112	1759	15.66
Average 1921-1925	2444	19.94	261	107	1687	13.86
Average 1926-30	1982	15.72	185	93	1664	13.17
1931	1881	15.66	165	88	1661	13.83
1932	1764	14.89	149	84	1547	13.05
1933	1720	14.60	150	87	1577	13.39
1934	1670	14.24	115	69	1611	15.24 (corrected)

TABLE Ic.

Vital Statistics of whole District during 1934 and previous ten years.

YEAR.	Total Population.	BIRTHS. Nett.		TOTAL DEATHS REGISTERED IN THE DISTRICT.		TRANSFERABLE DEATHS.		NETT DEATHS BELONGING TO THE DISTRICT.			
								Und'r 1 yr. of age		At all Ages.	
		Number.	Rate.	Number.	Rate.	of Non-resid'ts registered in the district	of Residents not regist'd in the district	Number.	Rate per 1,000 Nett Births.	Number	Rate.
1923	121,700	2426	19.11	1527	12.54	78	227	238	98	1676	13·77
1924	123,100	2328	18.91	1573	12.78	88	229	225	97	1714	13·92
1925	122,900	2174	17.69	1644	13·38	84	227	286	131	1787	14·54
1926	124,200	2160	17·39	1421	11.44	93	268	195	90	1596	12.85
1927	127,100	1892	14.88	1645	12.93	121	261	206	109	1785	14.04
1928	127,100	1916	15.07	1588	12.49	152	277	175	91	1614	12.69
1929	126,100	1967	15.60	1608	12.75	151	315	205	104	1772	14.05
1930	126,100	1975	15.66	1437	11·40	185	292	145	73	1544	12.24
1931	120,100	1881	15.66	1518	12.63	157	300	165	88	1661	13.83
1932	118,500	1764	14.89	1376	11.61	150	301	149	84	1547	13.05
1933	117,800	1720	14.60	1458	12.38	186	305	150	87	1577	13·39
1934	117,490	1670	14.24	1519	12.93	191	283	115	69	1611	15.24 (corrected)

Area of District in acres (Land and Inland Water)............ 5,757

Total population at all ages..................	119,001	At Census of 1931
Number of structurally separate dwellings	30,079	
Average rooms per occupied dwelling......	4·47	
Average family occupation	4·36	
No. of families per occupied dwelling......	1.02	
Average size of private family............	3·78	
Average number of persons per room...	0.85	

TABLE Ib.

Causes of Death at Different Periods of Life in the County Borough of Preston.

Causes of Death.	Sex.	All Ages.	0—	1—	2—	5—	15—	25—	35—	45—	55—	65—	75—
ALL CAUSES	M	774	66	12	18	19	25	32	52	97	155	193	105
	F	838	50	9	11	20	31	36	54	82	150	219	176
1 Typhoid and paratyphoid fevers	M	...	...	...	...	...	...	...	...	...	...	...	...
	F	...	...	...	...	...	...	...	...	...	...	...	...
2 Measles	M	15	4	5	4	1	1	...	...	...	...	...	...
	F	11	3	2	3	3	...	...	...	...	...	...	...
3 Scarlet Fever	M	2	...	...	...	1	...	...	1	...	...	...	...
	F	...	...	...	...	...	...	...	...	...	...	...	...
4 Whooping Cough... ...	M	1	...	...	...	1	...	...	...	...	...	...	...
	F	2	1	...	1	...	...	...	...	...	...	...	...
5 Diphtheria	M	3	...	...	2	...	...	...	...	1	...	...	...
	F	5	...	1	2	1	...	...	...	1	...	...	...
6 Influenza	M	8	...	...	...	1	...	...	1	3	...	...	3
	F	13	1	1	...	...	1	...	2	1	3	3	1
7 Encephalitis lethargica ...	M	...	...	...	...	...	...	...	...	...	...	...	...
	F	...	...	...	...	...	...	...	...	...	...	...	...
8 Cerebro-spinal fever ...	M	...	...	...	...	...	...	...	...	...	...	...	...
	F	1	...	1	...	...	...	...	...	...	...	...	...
9 Tuberculosis of ... respiratory system ...	M	50	...	...	...	...	7	9	7	18	7	2	...
	F	35	...	...	...	2	12	8	5	3	3	1	1
10 Other tuberculous diseases	M	8	...	...	...	2	4	1	1	...	...	...	...
	F	6	1	...	1	...	...	1	1	1	...	...	1
11 Syphilis	M	4	...	...	...	...	...	...	1	...	2	1	...
	F	...	...	...	...	...	...	...	...	...	...	...	...
12 General paralysis of the insane, tabes dorsalis...	M	10	...	...	...	...	...	1	2	2	3	2	...
	F	...	...	...	...	...	...	...	...	...	...	...	...
13 Cancer, malignant disease	M	92	...	...	...	...	1	1	5	11	30	35	9
	F	127	...	...	...	...	...	1	12	21	33	47	13
14 Diabetes	M	8	...	...	...	...	...	...	...	1	2	4	1
	F	14	...	...	...	...	...	...	...	1	6	5	2
15 Cerebral hæmorrage, etc.	M	27	...	...	...	...	...	...	1	4	3	9	10
	F	61	...	...	...	...	...	...	...	5	11	28	17
16 Heart disease	M	203	...	...	...	1	2	3	8	20	54	71	44
	F	221	...	...	...	1	4	1	7	13	50	71	74
17 Aneurysm	M	2	...	...	...	...	...	...	...	1	1	...	...
	F.	...	...	...	...	...	...	...	...	...	...	...	...

18 Other circulatory diseases	M	35	...	...	...	...	...	...	1	2	7	11	14
	F	35	...	...	...	...	...	...	...	4	2	17	12
19 Bronchitis...	M	27	1	...	1	...	...	...	...	5	4	12	4
	F	26	2	...	...	...	...	...	1	...	2	8	13
20 Pneumonia (all forms) ...	M	53	4	3	6	2	1	2	5	7	10	12	1
	F	47	8	3	1	2	5	3	4	6	4	7	4
21 Other respiratory diseases	M	7	...	...	...	1	1	...	3	1	1	...	...
	F	7	1	...	...	...	...	...	2	1	...	2	1
22 Peptic ulcer	M	10	...	...	...	...	1	1	...	6	2	...	...
	F	3	...	...	...	...	...	...	1	2	...	...	...
23 Diarrhœa, etc.	M	3	3	...	...	...	...	...	...	...	...	...	...
	F	6	2	...	...	1	...	...	...	...	2	1	...
24 Appendicitis	M	5	...	...	1	1	...	...	...	1	...	2	...
	F	6	...	...	...	...	3	1	...	...	2	...	...
25 Cirrhosis of Liver ...	M	7	...	...	...	...	...	...	...	...	2	5	...
	F	...	...	...	...	...	...	...	...	...	...	...	...
26 Other diseases of liver, etc.	M	2	...	...	...	...	...	...	...	...	...	1	1
	F	6	...	...	...	...	...	...	...	1	3	2	...
27 Other digestive diseases	M	15	2	...	...	2	...	4	2	1	1	3	...
	F	23	2	...	2	1	...	...	...	2	5	8	3
28 Acute and chronic nephritis	M	32	1	...	...	...	1	3	3	3	6	9	6
	F	33	...	...	...	...	...	4	5	6	4	9	5
29 Puerperal sepsis	F	6	...	...	...	...	1	4	1	...	...	...	...
30 Other puerperal causes ...	F	14	...	...	...	...	2	8	4	...	...	...	...
31 Congenital debility, premature birth, malformations, etc.	M	43	43	...	...	...	...	...	...	...	...	...	...
	F	25	25	...	...	...	...	...	...	...	...	...	...
32 Senility	M	6	...	...	...	...	...	...	...	...	...	2	4
	F	19	...	...	...	...	...	...	...	...	1	...	18
33 Suicide	M	5	...	...	...	...	...	1	...	1	1	2	...
	F	8	...	...	...	...	1	1	1	2	3	...	...
34 Other violence	M	38	3	1	2	4	1	4	7	4	5	4	3
	F	25	1	...	1	4	1	1	2	1	4	5	5
35 Other defined diseases ...	M	53	5	3	2	2	5	2	4	5	14	6	5
	F	53	3	1	...	2	3	4	6	9	14	5	6
36 Causes ill-defined or unknown	M	...	...	...	...	...	...	...	...	...	...	...	...
	F	...	...	...	...	...	...	...	...	...	...	...	...

TABLE Ie.

Number and Causes of Death in each Ward for the Year 1934.

Cause of Death	St. John's Ward	Avenham Ward	Christ Church Ward	Ashton Ward	Maudland Ward	St. Peter's Ward	Moorbrook Ward	Park Ward	Trinity Ward	Deepdale Ward	Ribbleton Ward	Fishwick Ward	Totals
Enteric Fever	...	...	...	...	...	...	...	...	...	...	...	...	...
Measles	4	2	2	...	5	...	2	2	4	4	...	1	26
Scarlet Fever	...	...	1	...	1	...	...	...	...	...	...	...	2
Whooping Cough	...	...	1	...	...	...	...	1	...	...	1	...	3
Diphtheria	...	1	1	...	1	2	...	...	2	1	...	...	8
Influenza	6	2	1	2	2	1	1	2	...	3	1	...	21
Encephalitis Lethargica	...	...	...	...	...	...	...	...	...	...	...	...	...
Cerebro-spinal Fever	...	...	...	...	...	...	...	...	1	...	...	...	1
Tuberculosis of Respiratory System	8	6	9	4	7	5	3	12	9	6	13	3	85
Other Tuberculosis Diseases	3	...	...	1	2	2	1	3	...	...	1	...	13
Syphilis	...	1	...	...	...	1	...	...	...	...	...	...	2
Gen. Paralysis of the Insane	...	1	2	...	1	...	1	2	1	1	...	1	10
Cancer, Malignant Disease	22	15	11	11	25	20	16	30	16	25	15	14	220
Diabetes	2	...	2	2	3	2	2	1	4	1	3	...	22
Cerebral Haemorrhage...	9	7	5	5	3	9	9	11	7	10	11	5	91
Organic Heart Disease	47	28	22	34	29	43	33	46	34	46	43	21	426
Aneurysm	...	...	...	...	...	1	...	...	...	...	...	...	1
Other Circulatory Diseases	14	4	5	7	2	5	1	9	8	8	4	5	72
Bronchitis	4	2	4	3	5	3	3	8	2	9	7	5	55
Pneumonia, all forms	9	6	8	8	12	5	6	11	13	8	6	7	99
Other Diseases of Respiratory Organs	...	2	2	...	...	2	1	3	2	...	1	...	13
Peptic Ulcer	..	...	1	2	2	...	...	2	1	2	1	2	13
Diarrhoea and Enteritis	2	...	...	...	...	1	...	1	...	1	1	1	7
Appendicitis	...	...	...	3	2	...	1	2	1	...	1	1	11
Cirrhosis of Liver	...	...	...	...	...	1	1	...	3	...	...	...	5
Other Diseases of Liver	1	...	1	1	1	3	1	...	...	1	1	...	10
Other Digestive Diseases	3	1	5	4	1	4	3	3	5	7	2	1	39
Acute and Chronic Nephritis	7	2	3	5	9	4	2	9	5	7	3	9	65
Puerperal Sepsis	...	...	...	...	1	1	...	...	...	2	1	1	6
Other Puerperal causes	2	...	1	2	...	2	...	1	1	2	2	1	14
Congenital Debility and Malformation. Premature Birth	9	2	4	4	6	3	6	5	4	9	12	4	68
Senility	1	1	...	4	1	3	1	4	3	5	3	2	28
Suicide	1	1	...	1	1	1	1	1	2	...	2	1	12
Other Violence	5	1	4	2	5	5	1	7	7	12	8	4	61
Other defined causes	14	9	4	7	9	10	8	9	9	6	12	5	102
Causes ill-defined or unknown	...	...	...	...	...	...	...	...	...	...	...	...	...
Totals	173	94	99	112	136	139	104	185	144	176	155	94	1611

TABLE IF.

Birth-rate, Death-rate, and Analysis of Mortality during the Year 1934. (Non-civilians included).

—	RATE PER 1000 TOTAL POPULATION		ANNUAL DEATH RATE PER 1,000 POPULATION									RATE PER 1,000 LIVE BIRTHS		PERCENTAGE OF TOTAL DEATHS			
	Live Births	Still-births	All Causes	Typhoid and Para-typhoid Fever	Small Pox	Measles	Scarlet Fever	Whooping Cough	Diphtheria	Influenza	Violence	Diarrhoea and Enteritis (under 2 years)	Total Deaths under One Year	Certified by Registered Medical Practitioners.	Inquest Cases	Certified by Coroner after P.M. No Inquest.	Uncertified Causes of Death
England and Wales	14·8	0·62	11·8	0·00	0·00	0·09	0·02	0·05	0·10	0·14	0·54	5·5	59	90·4	6·5	2.1	1·0
121 County Boroughs & Great Towns, including London ...	14·7	0·66	11·8	0·00	0·00	0·12	0·02	0·06	0·11	0·12	0·47	7·4	63	90·5	6·1	2·9	0·5
132 Smaller Towns (1931 Estimated popul'ns 25,000-50,000)	15·0	0·67	11·3	0·00	0·00	0·07	0·02	0·04	0·09	0·14	0·42	3·6	53	91·2	6·1	1·6	1·1
London	13·2	0·50	11·9	0·00	0·00	0·20	0·02	0·07	0·11	0·12	0·56	12·6	67	87·7	6·3	6·0	0·0
County Borough of Preston...	**14·24**	**0·89**	**15·24**	**0·00**	**0·00**	**0·22**	**0·02**	**0·03**	**0·07**	**0·18**	**0·52**	**4·2**	**69**	**88·4**	**7·0**	**1·1**	**3·5**

II.—Sanitary Circumstances of the District.

A.—WATER SUPPLY.

I am indebted to Mr. E. C. Oakes, M.Inst.C.E., Water Engineer, for the following :—

" Preston water is obtained from upland gathering grounds, chiefly moorland, in the Forest of Bowland, and on the southern side of Longridge Fell. There are two intake works in each of these two areas, the largest being that at Langden, near Dunsop Bridge. The Bowland Estate, with an area of 6,775 acres, is drained by the Langden and Hareden Streams, and the water is soft and well suited for all domestic and industrial purposes.

To avoid possibilities of contamination the Corporation purchased this watershed under the powers given by their Act of 1921, and only sheep-grazing and shooting is permitted upon the area. The same Act also empowered the construction of a new aqueduct to convey the water from the gathering areas to the Longridge storage reservoirs, and this work is now practically finished. It consists of some 11 miles of large steel pipes, together with two tunnels, totalling nearly one mile in length, and several river crossings by steel bridges. In addition, a large storage reservoir has been constructed near Longridge, and the intake works at Langden have been re-built and brought up to date. The expenditure upon these works amounts to approximately £670,000, but their successful completion ensures that the sources of supply and the conveyance of water to the storage reservoirs are secured for many years to come.

The gathering areas on Longridge Fell are not the property of the Corporation, who have only the water rights, but owing to the danger of local contamination of the supply in this locality it is essential that in the near future this property should be acquired. The two watersheds concerned are situate around the head waters of the Dean and Cowley Brooks, and their combined area amounts to nearly 700 acres; the water is soft and satisfactory in every respect.

The whole of the foregoing supplies converge upon the four large storage reservoirs in the neighbourhood of Longridge, and, after decanting through these reservoirs, the water passes on to Grimsargh, where it is strained through fine-mesh copper cloth which removes the coarser material in suspension before entering the mains to Preston.

The Grimsargh service reservoirs, and to a lesser extent the Longridge reservoirs, all of which are uncovered, will in the near future be increasingly threatened with the smoke and dirt from an urbanised and industrial area, and this fact, together with the discolouration due to peat on the gathering grounds and the presence of minute animalculæ and flora of many descriptions, all render it advisable that modern filtration plant should be installed during the next few years. Such filters, in addition to producing a water of perfect clarity, would practically eliminate any risk of contamination from whatever source it may arise.

The water undertaking, in addition to supplying the statutory area of Preston Borough and Longridge Urban District, also furnishes supplies to extensive outside areas extending down to the borders of Southport, and also for a considerable distance around Longridge, and the total population connected to the supply is 144,000 persons, through upwards of 150 miles of mains.

The expenditure upon the undertaking is approximately £1,400,000, of which about one-third has been repaid."

The following report was made by the Borough Analyst upon a sample of the town's water submitted on February 15th, 1935 :—

	Parts per 100,000.
Total solid matter in solution	6.64
Oxygen required to oxidise in 15″	0.071
Oxygen required to oxidise in 3 hours	0.138
Ammonia	0.001
Ammonia from organic matter (by distillation with alkaline permanganate)	0.005
Nitrogen as nitrates	None
Nitrogen as nitrites	None
Combined chlorine	0.95
Total hardness	3.0

The sample was clear, faintly yellow and odourless. It contained only a minute trace of suspended matter, which consisted of vegetable débris and hydrated oxide of iron, with diatoms and particles of siliceous matter.

The water is a very good upland surface water, well suited for drinking and all domestic purposes.

Reaction to litmus, neutral. P.H. value 6.9.

(Signed) W. H. ROBERTS, M.Sc., F.I.C.,
Borough Analyst.

B.—CLOSET ACCOMMODATION.

There are approximately 32,993 fresh water closets, 338 waste water closets, 12 trough closets and 36 privy middens. The sanitary conveniences in use at factories, workshops and schools are not included in the above figures.

C.—SCAVENGING.

The work has been carried out satisfactorily. The bulk of the town's refuse is dealt with at Argyll Road, and is subjected to salvage treatment, which includes machinery for dealing with condemned meat, slaughterhouse refuse and fish offal.

The following information for the year ended March 31st, 1935, has been kindly provided by Mr. H. E. Tye, Cleansing Superintendent :—

Amount of refuse collected—28,164 tons.

This has been dealt with as follows, the weights being approximate :—

Paper, metal, rags, etc., sold	1,035 tons.
Crude refuse, clinker, etc., sent direct to tips	529 ,,
Dust and cinders separated by screening plant, sold, or sent to tips	20,670 ,,
Tailings incinerated	5,930 ,,

Street Cleansing.

There are 119 miles of paved streets in the Borough, exclusive of back passages and footpaths.

Approximate mileage cleansed	three times daily	5½
,, ,, ,,	twice daily	4
,, ,, ,,	once daily	10
,, ,, ,,	four times weekly	10
,, ,, ,,	three times weekly	11¾
,, ,, ,,	twice weekly	49¼
,, ,, ,,	once weekly	28½

Gully Cleansing.

Number of gullies cleansed—102,125.

Market Refuse.

Amount collected and destroyed—670 tons.

D.—SEWAGE DISPOSAL.

The trunk sewer system, consisting of the Northern, Aqueduct, Marsh Lane, Syke, Ribbleton, New Hall Lane and Southern sewers, together with the storm overflows at Walton Bridge, Old Tram Bridge, New Bridge, and above and below the Dock, have been described in detail in previous reports.

The sewage is raised from a sump at the station in Watery Lane by impelling electric pumps and delivered by two rising mains at the sewage works on Freckleton Farm. Here it passes through a screening chamber, detritus tanks and settling tanks, with a capacity of approximately 2,000,000 gallons. The effluent is conducted into the river. The plant is capable of dealing with three times the dry weather flow on the basis of a population of 150,000. The final effluent, which is deprived of its gross impurities by the treatment given, is mixed with the comparatively enormous volume of the tidal estuary and is thus satisfactorily disposed of.

E.—WORK OF THE DISTRICT SANITARY INSPECTORS.

1. Dwellinghouses.

Four thousand two hundred and sixty-two inspections and 3,919 re-inspections were made, details of which are given in Table IIa at the end of this section.

These inspections and re-inspections involved the sending of 2,366 letters with regard to the common defects, such as yard flagging, cleansing and decorating, provision of ashpails, drainage defects and general sanitary repairs and improvements. In connection with surveys made under the Housing (Consolidated) Regulations and Housing Acts, 1925 and 1930, 187 informal notices were sent to owners. There were also nine statutory notices under Public Health Acts and 171 under the Housing Acts, served by the authority of the Council. The results of the work are shewn in Table IIb, 2,224 houses in all having been dealt with.

2. Drains.

One thousand nine hundred and sixty-three inspections and 1,745 re-inspections were made during the year, details of which are given in Table IIa. The work done is shewn in Table IIb.

3. Schools.

Thirty-eight visits were made to these premises, and defects were found as follows :—drains and water-closets, 8; urinals, 4; yard surface, 1; all such defects being remedied. In six instances schools were dealt with for rat infestation, and in each case the drains were found to be defective.

4. Factories and Workshops.

The usual tables dealing with registered premises have been forwarded to the Home Office as required by the Factory and Workshop Act, 1901, but are not included in this report. During the course of inspection 229 defects were found, and all were remedied. A summary of work done is given in Table IIc.

5. Offensive Trades.

The following offensive trades are established in the Borough :—

Soap boilers, 3; fat and tallow melters, 5; knackers yard, 1; gut scraper, 1; tripe boilers, 5; fish friers, 163. One new fish frier was registered, and one ceased business.

All these premises are subject to frequent inspection, 140 visits being made during the past year.

6. Pig Keepers.

There are 16 pig keepers in the Borough, of which number 10 are farmers. The number of pigs kept varies according to seasonal trade demands, and ranges from 600 to 900. Sanitary conditions, especially those relating to the distance from inhabited dwellings, drainage of floors and buildings, and means of temporary storage of manure, are satisfactory. Six visits were made by the Sanitary Inspectors and 40 by the Veterinary Officer.

7. Common Lodging Houses.

There are 18 common lodging houses on the register, affording accommodation for 844 persons in 124 rooms. The average number of lodgers per night was 344. The premises are visited regularly, 734 visits being made in 1934.

The premises are mainly lacking in means of escape in case of fire. The provision of accommodation for personal ablutions and for the storage of personal effects is not satisfactory. One house which had accommodation for 43 beds was taken off the register on account of its dilapidated and insanitary condition. Revised bye-laws for the control of common lodging houses were approved by the Ministry of Health in 1931.

8. Houses Let in Lodgings.

There are 18 houses so registered, with a daily population of 187 persons, but a number of other houses are probably used as such without registration. Thirty-two visits were made. Bye-laws for the control of such premises are restricted in their scope by the provisions of the Rent Restrictions Acts.

9. Rats and Mice Destruction Act, 1919.

The following work was done under the above Act as a result of complaints by tenants or notification by occupiers of infested buildings after periodical notices in the Press :—

Factories	12
Food-preparing premises	58
Dwellinghouses	300
Schools	6
Other premises	11

Three hundred and seventy-three rats were destroyed in the 387 buildings in work carried out on the instructions of the Sanitary Inspectors. A total of 752 visits was made.

10. Stable Premises and Garages.

Sixty-seven visits have been made to these premises. General repairs have been carried out in five instances; repairs to drains, 4; premises cleansed, 7; middens abolished, 3 (pail system substituted); offensive accumulations removed, 13. The arrangement with the Cleansing Department for the periodic removal of refuse continues to work satisfactorily.

11. Theatres and Cinemas.

In the 19 cinemas and theatres in the town the seating accommodation is:

Cinemas	17	Total Seats ...	16,603
Theatres	2	Total seats ...	5,050

In addition to the above-mentioned places of amusement, there are 14 dance halls and 8 billiards halls for public use.

All the above require an annual licence granted in respect of theatres, dance halls and billiards halls by the Justices and in respect of cinemas by the Watch Committee of the Council.

Under the Theatres and Music Halls Order, 1920, a certificate is required by the licensing body from the Medical Officer of Health stating that the premises are satisfactory in sanitary and other respects before the licence can be granted. This was refused in May, 1935, in four instances on account of one or more of the following reasons :—

1. General dilapidations.
2. Lack of means of escape from fire.
3. Insanitary arrangement of lavatories and water-closets,
   and, in the case of cinemas,
4. Undue proximity of front seats to the screen.

12. Shops Acts.

The Shops Acts of 1912 and 1913 are administered by the Police, as also is part of the Shops Act, 1934. That part of the Act of 1934 which deals with the health and comfort of shop workers in regard to the provision of sanitary arrangements, ventilation of premises, suitable and sufficient lighting and ventilation, and provision of seating accommodation is administered by the Health Department.

13. Caravans.

One hundred and seventy visits have been made by the Inspectors to these premises, the number and situation of which are as follows :—

Beech Street, 1; rear of Chestnuts Sanatorium, 1; Greenbank Street, 2; Kent Street, 2; Manchester Road, 1; Pleasant Street, 1; Queen Adelaide Yard, 1; Strawberry Gardens, 4; Turner's Yard, 2; West View, 2—a total of 17.

Three vans were closed and two were removed or demolished as a consequence of action by the Corporation. All the remaining vans, with the exception of those occupied by show people, are under agreement to close as and when alternative accommodation for the occupiers is found.

14. Private Passages.

Four private passages were flagged or asphalted, drained, and doors to entrances provided or repaired. The work was carried out by local contractors either upon instructions from the owners concerned, or by tender in cases of default. Nine offensive accumulations were removed.

15. Housing Applications.

The Public Health Department co-operates with the Housing Department in the investigation of applications for Corporation houses by inspections of the present housing conditions, the cleanliness of premises, and the general suitability of the applicant. The following is a summary of such visits :—

Number of applications investigated	289	
In suitable accommodation	66	before application
	27	after application
Left the district	32	
In lodgings	56	overcrowded
	29	not overcrowded
Householders in overcrowded conditions ...	69	
Living in insanitary houses	10	

16. Smoke Observations.

There are approximately 140 industrial chimneys in the Borough. Eighty-three observations, each of a period of 30 minutes, were made during the year. Statutory notices were served in two cases where the emissions proved to be unreasonable. No prosecutions were taken.

17. Miscellaneous.

In addition to the foregoing detailed work, 60 visits were made to public conveniences, 46 to premises where animals were so kept as to be a nuisance, 18 to tips, and one to an exhumation.

18. Disinfection.

Disinfection of premises is carried out by the spray method after measles or tuberculosis, and by the gaseous method after all other notifiable infectious diseases. The total number of houses disinfected was 2,431, and 11 schools and six other institutions. In 54 instances goods at various schools were disinfected before being offered for sale as "jumble." In addition, 266 beds, 103 mattresses, 243 bolsters, 511 pillows, and 251 other articles of bedding were subjected to steam disinfection, and 730 books from infected houses were treated by formic aldehyde gas and were returned to the libraries concerned.

19. Canal Boats Acts, 1877 and 1884.

There are 16 canal boats on the register. Certificates have been received and cancelled in respect of seven boats which have been broken up and crossed off the register. A total of 150 visits has been made to the 16 boats.

There were 14 infringements of regulations, relating mostly to painting and to general dilapidations, and all were dealt with satisfactorily. Legal proceedings were not necessary in any case.

The condition of the boats as regards cleanliness was satisfactory. Of the 44 persons in occupation in 1934, 25 were adult males, nine were adult females, and 10 were children—four were children under school age. There has not been any case of infectious disease during the year.

The work of inspection has been carried out by Inspector Holden in addition to his work as Port Sanitary Inspector, and no special remuneration was made.

F.—HOUSING.

That portion of the work of the Public Health Department relating to the fitness of dwellings, etc., has been dealt with in Section IIE. A summary of house inspections and houses repaired appears in the schedule appended.

The houses built each year since 1911 are as follows :—

Year	By private enterprise	By the Council	Total No.
1911	193	...	193
1912	143	...	143
1913	142	...	142
1914	118	...	118
1915	95	...	95
1916	45	...	45
1917	19	...	19
1918	2	...	2
1919	1	...	1
1920	13	...	13
1921	8	239	247
1922	33	244	277
1923	50	...	50
1924	186	...	186
1925	367	190	557
1926	248	252	500
1927	409	110	519
1928	278	320	598
1929	224	117	341
1930	128	280	408
1931	135	112	247
1932	244	428	672
1933	274	130	404
1934	277	99	376
	3632	2521	6153

Vacant dwellinghouses.

Mr. W. Allison Davies, C.B.E., Borough Treasurer, has very kindly supplied the following information as to vacant dwellings as at March 31st, 1935 :—

Number	Rateable Value. £	Number	Rateable Value. £
		160	
1	3	4	30
10	4	2	31
12	5	2	32
2	6	4	34
1	9	6	35
6	11	1	36
10	12	1	37
6	13	2	38
6	14	1	40
10	15	1	41
8	16	1	42
11	17	3	44
4	18	3	45
8	19	2	48
10	20	1	50
6	21	1	52
18	22	1	54
8	23	1	62
3	24	1	66
6	25	1	72
7	26	2	73
2	28	1	75
5	29	1	83
160		203	

The following information has been extracted from the Minutes of the Housing Committee for January, 1935 :—

HOUSING ACT, 1925.

Total amount of advances	£581,057 1s. 6d.
Amount outstanding at date	£358,807 4s. 7d.
Number of Houses	934

SMALL DWELLINGS ACQUISITION ACTS.

Total amount of advances	£198,018 0s. 0d.
Amount outstanding at date	£97,675 8s. 2d.
Number of Houses	380

HOUSING SCHEDULE.

Number of new houses erected during the year :—

(a) Total number erected	376
(b) Number erected as part of municipal housing schemes	99

1.—Inspection of Dwelling-houses.

(1) (a) Total number of dwellinghouses inspected for housing defects (under Public Health or Housing Acts)	5238
(b) Number of inspections made for the purpose	11098
(2) (a) Number of dwellinghouses (included under sub-head (1) above) which were inspected and recorded under the Housing (Consolidated) Regulations, 1925 and 1932	437
(b) Number of inspections made for the purpose	2111
(3) Number of dwellinghouses found to be in a state so dangerous or injurious to health as to be unfit for human habitation	56
(4) Number of dwellinghouses (exclusive of those referred to in the preceding sub-heading) found not to be in all respects reasonably fit for human habitation	2272

2.—Remedy of Defects without Service of Formal Notices.

Number of defective dwellinghouses rendered fit in consequence of informal action by the Local Authority or their Officers	2175

3.—Action under Statutory Powers.

(A) Proceedings under Sections 17, 18 and 23 of the Housing Act, 1930 :—	
(1) Number of dwellinghouses in respect of which notices were served requiring repairs	97
(2) Number of dwellinghouses which were rendered fit after the service of formal notices :—	
(a) by Owners	33
(b) by Local Authority in default of owners	16
(B) Proceedings under Public Health Acts :—	
(1) Number of dwellinghouses in respect of which notices were served requiring defects to be remedied	—
(2) Number of dwellinghouses in which defects were remedied after the service of formal notices :—	
(a) by Owners	—
(b) by Local Authority in default of owners	—
(C) Proceedings under Sections 19 and 21 of the Housing Act, 1930.	
(1) Number of dwellinghouses in respect of which Demolition Orders were made	31
(2) Number of dwellinghouses demolished in pursuance of Demolition Orders	—

(D) Proceedings under Section 20 of the Housing Act, 1930 :

(1) Number of separate tenements or underground rooms in respect of which Closing Orders were made ... ... —

(2) Number of separate tenements or underground rooms in respect of which Closing Orders were determined, the tenements or rooms having been rendered fit ... ... —

During the year four areas were declared Clearance Areas by the Council (River Street and Ribblebank Street—14 houses, Savoy Street and Red Cross Street—12 houses, Birk Street—10 houses, and Kirkham Street, Fylde Road and Moss Street—16 houses and 11 cellar dwellings) and confirmed by the Minister of Health. A local enquiry was held after objection had been made by the owners concerned of two areas; 180 persons will require re-housing.

APPENDIX
TO
SECTION II.

TABLE IIA.

	SANITARY DISTRICTS.						
House Inspections.	No. 1	No. 2	No. 3	No. 4	No. 5	No. 6	Total
Inspected on Complaint ...	716	699	609	1056	425	757	4262
Re Infectious Diseases ...	140	110	95	70	23	95	533
Re Housing Acts	65	103	85	56	...	128	437
Re Rent Restrictions Acts ...	...	2	1	...	...	3	6
TOTALS	921	914	790	1182	448	983	5238
House Re-Inspections.							
Inspected on Complaint ...	711	478	779	474	585	892	3919
Re Infectious Diseases ...	63	46	33	25	1	50	218
Re Housing Acts	168	452	501	189	2	362	1674
Re Rent Restrictions Acts ...	...	45	1	...	...	3	49
TOTALS	942	1021	1314	688	588	1307	5860
Drain Inspections.	280	337	381	224	482	259	1963
Drain Re-Inspections.	170	294	298	124	613	246	1745

TABLE IIb.

Summary of Sanitary Improvements effected.

	Public Health Acts. Sanitary Districts							Housing Acts. Sanitary Districts						
	No. 1	No. 2	No. 3	No. 4	No. 5	No. 6	Total	No. 1	No. 2	No. 3	No. 4	No. 5	No. 6	Total
Houses dealt with :—	**276**	**478**	**340**	**229**	**353**	**348**	**2024**	**34**	**71**	**45**	**1**	...	**49**	**200**
Lighting and ventilation improved ...	25	56	21	23	23	34	182	21	47	44	1	...	22	135
Roofs reconstructed or repaired ...	19	105	39	26	41	17	247	8	67	14	1	...	19	109
Floors repaired or re-laid	6	42	36	28	30	17	159	12	21	33	1	...	20	87
Fireplaces repaired or provided... ...	8	19	13	16	23	6	85	3	8	5	1	...	11	28
Staircases repaired	3	35	19	19	15	14	105	14	12	29	...	...	11	66
Walls and chimneys pointed and repaired	30	91	56	31	48	32	288	12	39	30	1	...	22	104
Repairs and renewals to W.C. accommodation	34	82	60	47	30	48	301	7	2	6	...	...	9	24
Portable ashpails provided	61	21	39	35	44	11	211	...	7	...	...	...	11	18
New sinks or other sanitary fittings ...	33	63	16	13	28	17	170	2	33	24	...	...	16	75
Yard and lobby pavements repaired ...	12	17	40	53	14	26	162	1	...	16	...	...	11	28
Drains tested, repaired or renewed ...	158	230	109	180	118	60	855	1	17	3	...	...	8	29
Gutters and downspouts repaired or renewed...	32	72	25	17	27	17	190	6	26	27	...	...	17	76
Provided with sufficient water supply...	5	...	4	4	6	7	26	...	...	...	...	...	2	2
Plasterwork and limewashing	43	56	49	19	32	33	232	34	...	39	1	...	28	102
General nuisances	7	9	56	1	8	12	93	...	...	...	...	...	8	8
Premises disinfected (verminous) ...	21	8	7	5	1	17	59	...	...	...	...	...	...	...
Houses closed—voluntarily	...	...	...	...	...	...	...	...	...	...	...	...	4	4
Houses demolished	...	...	...	...	...	...	...	...	...	2	...	...	7	9
Sufficient sanitary accommodation provided	...	...	1	...	...	...	1	...	2	1	...	...	...	3
Bakehouses cleansed	...	...	3	...	1	2	6	...	...	...	...	...	...	...
Offensive accumulations removed ...	12	...	20	2	26	13	73	...	...	...	...	...	...	...
Vans closed	2	...	...	...	...	1	3	...	...	...	...	...	...	...
Tipplers converted	...	57	...	...	...	23	80	...	...	...	...	...	...	...

TABLE IIc.

Summary of Work done under the Factory and Workshop Acts.

	No. 1 District	No. 2 District	No. 3 District	No. 4 District.	No. 5 District	No. 6 District	Total.
Number of factories and workshops on register	190	331	262	250	200	219	1452
,, circular letters sent re out-workers	...	...	...	...	...	...	...
,, out-workers reported ...	...	...	...	...	1	...	1
Visits to factories and workshops ...	14	49	17	21	1	12	124
,, retail bakehouses	17	10	62	1	1	31	122
,, public bakehouses	...	...	...	...	...	...	...
,, home-workers' premises ...	...	...	...	...	...	13	13
Drains tested	...	20	...	1	...	1	22
Defects found and remedied :—							
Defective drains...	...	20	...	1	...	1	22
,, sinks or other sanitary fittings	...	10	...	...	...	...	10
,, spouts and roofs	1	20	...	...	...	1	22
,, water closets	2	15	...	...	...	...	17
,, yard pavements	1	10	...	...	...	...	11
Limewashing required	1	21	10	1	...	1	34
General nuisances	...	83	1	...	...	...	84
Insufficient W.C. accommodation for males	...	...	...	1	...	...	1
Insufficient W.C. accommodation for females	...	...	...	1	...	...	1
No receptacle for refuse	...	2	...	...	...	...	2
Manure accumulations	...	...	2	...	...	17	19
Totals	5	181	13	4	...	20	223

Total defects found, 223; remedied, 223.

III.—Port Sanitary Administration.

A.—PORT SANITARY DISTRICT.

The Port Sanitary district of Preston extends from Formby Point on the south, to a point about 2,350 yards south of the Victoria Pier, South Shore, Blackpool, on the north. The dock, which is 3,200 feet long by 600 feet wide, covers 40 acres, and is approached by the entrance basin, 850 feet long by 300 feet wide, which covers 4¾ acres.

The communicating locks are 550 feet long and 66 feet wide, with a depth of 29 feet 6 inches at high water ordinary spring tide. The docks are situated in the Borough, and are about 16 miles up the River Ribble from deep water at the bar.

The quays are 1½ miles long. There are 170 acres of storage ground and 37,489 superficial yards of covered floor space.

The dock is equipped with hydraulic and steam cranes, and has ample railway facilities.

The cattle lairage accommodates 800 cattle, and 1,600 sheep or pigs.

1. Amount of Shipping entering the Port during 1934.

1515 ships, of which 276 were foreign, entered the port. The details showing the tonnage, classification, etc., coastwise and foreign, and the method of propulsion, is shown in Table IIIa at the end of this section.

2. Character of Trade of Port.

(a) There is no passenger traffic.

(b) Cargo traffic is principally with the Irish Free State, Norway, France, the Baltic Ports and other countries, as detailed in Table IIId at the end of this section.

The principal exports are coal, coke, machinery and salt cake.

3. Source of Water Supply.

(a) The port derives its water from the town supply, an upland surface water of good quality.

(b) Vessels are supplied from the above source.

(c) Water boats are not used.

4. Infectious Diseases.

In view of the fact that the Port Sanitary Regulations, 1933, made by the Minister of Health superseded the regulations for removal to hospital of persons brought within the district of the Authority, by any ship or boat, who are infected with a dangerous and infectious disorder, made by the Council on the 25th July, 1912, it was resolved—

(1) That the above-mentioned regulations made by the Council be revoked.

(2) That the Council acting as the Port Sanitary Authority for the Port of Preston, do hereby establish, under article 10 of the Port Sanitary

Regulations, 1933, the undermentioned mooring stations for ships arriving at Preston, viz. :—

(a) One of the mooring buoys in the centre of the Albert Edward Dock;

(b) " breasted off " at the place of mooring, discharge or loading.

(3) That the mooring place referred to at (a) above is for " infected " or " suspected " ships; and that at (b) for all other unhealthy ships.

(4) That a standing exemption from detention under Article 14 be granted by the Medical Officer of Health in respect of ships with infectious diseases other than cholera, plague, yellow fever and smallpox on board, and ships otherwise clean arriving from ports in areas listed under Article II.

(5) That when necessary, this Authority will convey the officers of the Customs and Excise Department to the mooring place referred to at (a) above, free of expense to the Crown.

(6) That the resolution of the Council of the 25th July, 1912, fixing places of quarantine, be rescinded.

All vessels are visited upon arrival by the Port Sanitary Inspector.

The following arrangements for notification of the Port Sanitary Authority of the arrival of inward vessels requiring special attention are in operation.

H.M. Customs and the Pilots are in touch with shipbrokers who have wireless and other information as to probable time of arrival.

The barge repair depôt in the river just below Lytham about 9½ miles from Preston, is in telephonic communication with H.M. Customs and the Pilots.

All vessels are boarded by the Port Sanitary Inspector and some by the Port Medical Officer as detailed above.

The following arrangements for the disposal of cases of infectious disease and for observation or surveillance of contacts are in being.

Cases of infectious disease are removed to a special ward at the Borough Isolation Hospital approved for the purpose by the Ministry of Health.

Contacts will be kept under observation or surveillance on the ship by the Port Medical Officer.

Infected quarters are disinfected by fumigation by sulphur dioxide by the Port Sanitary Inspector. Infected bedding and clothing are removed by van to the Corporation Disinfecting Station in Argyll Road.

Cleansing of persons is carried out at the above station.

Ambulance facilities are provided from the Isolation Hospital.

Venereal Disease.

Enquiries as to the existence of these diseases are made by the Port Sanitary Inspector. Leaflets and posters printed in English, Norwegian and Swedish are distributed and displayed. Treatment, free of cost, is provided at the Preston Royal Infirmary.

Bacteriological examinations are carried out at the Public Health Laboratory, Manchester, and at the Preston Royal Infirmary.

There were no cases of infectious disease landed from vessels, nor were any such cases reported to have occurred during the voyage.

5. Measures against Rodents.

Steps taken for detection of rat plague.

Enquiries are made by the Port Sanitary Inspector and the rat-catcher as to mortality among rats. Daily observation is made by the rat-catcher—a whole-time man, and any undue mortality reported to the Port Medical Officer who makes the necessary arrangements with the Laboratory of the Preston Royal Infirmary, for bacteriological examinations.

The passage of rats between ship and shore is prevented by rat guards placed on cables.

Ships are deratised mainly by dogs, ferrets and traps, in some instances supplemented by fumigation by means of sulphur dioxide.

Premises in the vicinity of the ships are subject to daily poison baiting. Lithographer's varnish, traps, dogs and ferrets also being used.

A whole-time rat-catcher is employed in Port Sanitary work

The following is a summary of his work :—

Poisoned baits set	6822
Caught by traps on board ship	64
Caught by traps, dogs and ferrets in dock premises ...	1582
Found killed by poisoned baits and lithographer's varnish	2863
Total rats killed	4509

The major part of the ground floor space in the warehouses is constructed of concrete.

No action has been taken to extend rat-proofing of ships or on shore.

6. Food Inspection.

Public Health Imported Food Regulations, 1925.
Public Health Imported Milk Regulations, 1926.
Public Health Preservatives in Food Regulations, 1925-1927.
Merchandise Marks Act, 1926.
No food to which these regulations apply enters this port.

Public Health (Regulations as to Food) Act, 1907.

LIST OF IMPORTED ARTICLES INSPECTED.
Indian Corn, Wheat, Sugar, Potatoes.

LIST AND WEIGHT OF ARTICLES CONDEMNED AND DESTROYED.
Nil.

The Preston (Shell Fish) Regulations, 1923.

These regulations forbidding the picking of mussels for human food, in the estuary of the River Ribble, came into force in October, 1923. Since then placards have been posted in prominent places on both sides of the river and at Preston. The placards and notices were renewed during 1934, and were supplemented by others warning the public against the danger of their being used for human consumption. All the fishermen on both the north and south sides of the river and at Preston have been served with copies of the notices. The mussel beds have been visited regularly by Inspector Henry S. Holden, who paid 14 visits to these beds during 1934. During the past year special precautions were taken regarding the inspection of cockles brought by the boats and conveyances from the Ribble beds, with a view to ascertaining the presence of mussels amongst them.

7. The Hygiene of Crew's Spaces.

In many of the vessels arriving in Preston the crew's spaces, particularly as regards air space, ventilation and lighting, are far from satisfactory. The Scandinavian ships on the other hand are as a rule well designed and form a marked contrast.

In my opinion, action by the Board of Trade with regard to crew's quarters is urgently needed.

APPENDIX
TO
SECTION III.

TABLE IIIA.

Amount of Shipping entering the Port Sanitary District during the Year 1934.

		Number	Tonnage	Number Inspected		Number reported to be defective	Number on which defects were remedied
				By the Med. Officer of Health	By the Sanitary Inspector		
Foreign	Steamers	252	301190	18	252	133	132
	*Motor	23	82571	7	23	...	...
	Sailing	1	574	...	1	...	...
Total Foreign ...		276	384335	25	276	133	132
Coastwise	Steamers	1198	210023	40	1121	153	148
	*Motor	41	14733	6	41	...	...
	Sailing	...	...	...	...	...	...
Total Coastwise ...		1239	224756	46	1162	153	148
Total Foreign and Coastwise ...		1515	609091	71	1438	286	280

Number of vessels reported as having, or having had during the voyage, infectious disease on board—NIL.

*Includes mechanically-propelled vessels other than steamers.

TABLE IIIB.

Rats destroyed by dogs, traps and ferrets, and number of Baits set for destruction of Rats in 1934.

Number of	Jan.	Feb.	Mar.	April	May	June	July	Aug.	Sept.	Oct.	Nov	Dec.	Total In Year
Brown Rats	130	131	135	124	166	131	127	126	123	124	155	100	1572
Black Rats	244	245	253	231	310	244	238	237	230	232	282	191	2937
											Total...		4509
No. of Baits set.	467	538	576	487	659	546	625	582	609	597	675	461	6822

TABLE IIIb.—Continued.

By Baits.								By Traps or Dogs			By other Methods.		
Phosphorous		Squills		Barium		Varnish		Warehouses	Ships	Docks	Warehouses	Docks	Total
Set	Taken	Set	Taken	Set	Taken	Set	Caught						
2196	901	2458	1070	2168	892	...	...	1555	64	23	4		Set 6822 Taken 4509

TABLE IIIc.

Report of Port Sanitary Work for the Year 1934.

Foreign	Steamships inspected	252
	Sailing Vessels inspected	1
	Motor Boats inspected	23
	Re-inspections	330
Coastwise	Steamships inspected	1121
	Sailing Vessels inspected	—
	Motor Boats inspected	41
	Re-inspections	611
Condition of all Vessels inspected	Good	1152
	Defective: Foreign 133 Coastwise 153	286

Foreign— 4 Wear and Tear ; 363 Dirty.
Coastwise—15 Wear and Tear ; 499 Dirty. } Total 881

DEFECTS REMEDIED—

Forecastle re-painted	1
,, cleansed	187
Dirty Lockers, Washhouses, Store Rooms, etc., cleansed ...	304
Foul Water Tanks cleansed...	—
Foul and defective W.C.'s cleansed and repaired	275
Accumulations of Offensive Rubbish removed	50
Damp Quarters remedied	—
Leaky Decks overhead caulked and Defective Hawse Pipes repaired	2
Defective Port-lights, Sky-lights and Dead-lights remedied ...	6
Defective Lavatory Waste Pipes, and Ventilators repaired ...	4
Defective Stove replaced	2
Dirty Galleys cleansed	38
Dirty Chain Lockers	—
Total	869

TABLE IIId.

Trade of Port.

The Chief Imports	Source	The Chief Exports	Destination
Wood Pulp	Canada, Germany, Sweden, Norway, and Finland	General	Dublin, Belfast and Baltic Ports
Timber	Canada, Norway, Russia, Roumania, Germany, Sweden, and Finland	Coal and Coke	Ireland and Baltic Ports
Stone	Norway, Wales, Scotland and Ireland	Machinery	Ireland
		Salt Cake	Baltic Ports
China Clay	Cornwall and Devon	Gas Retort Carbon	France
Potatoes	Ireland		
Live Stock	Dublin	Petrol	I.O.M., etc.
Esparto Grass	Oran and Azew		
Cement	London, Belgium and France	Bitumen	Belfast and Dublin
General	Sweden, Belfast, Dublin, Germany, Norway & Finland	Scrap Iron	Poland, etc.
Whiting	London and Cornwall		
Motor Spirit	London and other Coastwise Ports, U.S.A., and Black Sea		
Slates	Wales and Norway		
Roof Tiles	France		
Round Timber	Scotland & Ireland		
Grain	Belfast, Dublin, Liverpool and Germany		
Sugar	Hamburg		
Bog Ore	Antwerp		
Pitwood	Scotland		
Bitumen	Cuba & Germany		

IV.—Food.

A.—MILK SUPPLY.

Fresh milk retailed in the Borough amounts to approximately 6,342 gallons daily, or eight and a half ounces per head per day, as against 5,922 gallons daily and eight ounces per head per day in 1933.

(a) Produced Daily in the Borough—

18 Cowkeepers in the Borough produce ... ... 581 gallons of which amount only 250 gallons are sold in the Borough.

(b) Retailed Daily in the Borough—

73	Dairymen with premises in the Borough	2044	,,
17	Resident kitters using premises outside the Borough	273	,,
34	" Mixed Business " shopkeepers	494	,,
13	Cowkeepers in the Borough	250	,,
123	Dairy Farmers with premises outside the Borough	2552	,,
171	Purveyors of ungraded bottled milk	256	,,
20	Purveyors of Grade " A " milk	266	,,
2	Purveyors of " Certified " milk	3	,,
1	Producer of " Pasteurised " milk	50	,,
1	Retailer of " Pasteurised " milk	150	,,
		6338	

In addition to the above sales, the recently-introduced scheme of milk supply to schools has resulted in the provision of 577 gallons per day in respect of 13,500 children; of this amount, 200 gallons are pasteurised.

There is an increase in the daily consumption on the previous year of 420 gallons. The sale of " Certified " milk is as last year, while the sale of Grade " A " milk has decreased from 354 gallons in 1933 to 266 gallons daily during 1934. Seventeen samples of graded milks were taken during the year, and all were found to be free from contamination and tubercle bacilli infection.

As a result of the extension of the Borough boundary, there is an increase in the number of cowkeepers of 12 with premises in the Borough, with a daily production of approximately 760 gallons from 308 cows. There is a total of 441 cows kept in farms in the Borough, and 52 visits were made to these premises by the Veterinary Officer. One thousand and seventeen clinical examinations were made, and sanitary surveys of each farm were carried out, visits being paid every three months. One hundred and sixty-two visits were also made by the Sanitary Inspectors to cowsheds, dairies and milkshops in the Borough during the year. Repairs to cowsheds, dairies or yards (including manure steads) were carried out on 11 premises, and six others have arranged for necessary repairs and improvements to be carried out without delay.

1. Tuberculosis in Milk.

From the figures shewing the percentage of tubercle-infected milk which has been sold to the public, it is obvious that there is no improvement in the production of a safer milk supply.

The reports of investigating officers shew that the Tuberculosis Order, in so far as the responsibility of the cowkeeper is concerned, is completely ignored in most cases. As long as this apathy persists in the farming community, the need for pasteurisation becomes more urgent if the milk supply of this country has to satisfy reasonably-minded people.

There are cases where the milk supply is infected and where the clinical evidence in the producing herd is not apparent. These cases may occur in the best regulated herds, and infected milk may be produced for some considerable time before there is any evidence of an abnormal condition of the udder.

The Milk Marketing Board recognise this, and recommended a scheme for the production of "Attested Milk," which is milk from a tubercle-free herd. To be safe, any other milk should be pasteurised.

A scheme for regular veterinary inspection of all milk-producing cattle is in operation in most counties in England and all in Scotland, and if such were adopted in this county, cowkeepers would be forced to observe their responsibilities under the Tuberculosis Order. This in itself would undoubtedly prevent the consumption of a considerable percentage of infected milk. The feeding of school children with raw milk, nine per cent. of which is known to be infected, is quite unjustifiable in the present state of our knowledge. The immediate remedy for this is the pasteurisation of all milk supplied to school children.

2. Milk Samples taken.

Four hundred and twenty-two samples of milk were taken for the purpose of examination for tubercle bacilli, and this number includes seven special samples taken from suspected animals. Out of these, 39 samples were found to be affected, which means that 9.24 per cent. of the milk shewed tubercle bacilli contamination. One sample only was taken from a farm inside the Borough, and that was taken from an individual cow suspected of tuberculosis. The remaining 38 samples were all taken in the course of delivery, and were from farms outside the Borough area. Included in the above number were 29 samples of milk supplied to schools, and six of these were found to be infected with tubercle bacilli. In 10 of the samples the biological examination was without result.

The veterinary investigations by the County Council officials in connection with the 38 positive samples previously referred to necessitated visits to approximately 29 farms and the examination of 1,045 milch cows, of which number 24 were found to be sources of infection, **15 cows shewing clinical tuberculosis (13 of these were affected in the udder at the time of inspection).** In four cases suspected animals had been removed from the farms before the visits of the veterinary officer. In a number of cases several visits were necessary before the affected animal was discovered. Eight cows were discovered by microscopic examination of their milk, and 13 were found as the result of the biological examination of their milk. In the case of the former the discovery is immediate, but in the latter it entails a waiting period of three to five weeks—a great disadvantage on account of the risk of infection from the use of that particular cow's milk during that period. Nineteen of these investigations shew negative result, but information in five of these shewed that cows had been removed from the farms before the visit of the veterinary investigating officer, and it is probable that the infected cows were amongst them. Of the 15 clinically affected animals stated above, 13 had indurated udders, indicative of tuberculosis, and two were suffering from clinical evidence of the disease apart from the udder.

3. Examination for the approximate amount of Butter Fat and Manurial Contamination.

These examinations are carried out by your Veterinary Officer. Three hundred and eighty-nine samples of milk were examined, and of these 148, or 38.02 per cent., were found to be unsatisfactory on account of manurial contamination, deficiency in butter fat, premature souring, etc., as against 36.5 per cent. in 1933 and 44.2 per cent. in 1932.

4. Examination for Bacterial Contamination.

This examination is carried out at the Pathological Laboratory of the Preston Royal Infirmary. Four hundred and twenty-two samples were examined during the year, and 66 shewed freedom from contamination. Ten were contaminated to a high degree.

The following is an analysis of the results obtained :—

Colon bacilli negative in 1 c.c.	Colon bacilli present in dilutions of a cubic centimetre			
	A 1 c.c.	B 0.1 c.c.	C 0.01 c.c.	D 0.001 c.c.
66	165	155	26	10

The interpretation of the above statement indicates in columns A and B slight unavoidable contamination, in column C avoidable contamination, and in column D gross and avoidable contamination.

The Public Health Department, as in previous years, carries out the policy of working in close co-operation with neighbouring authorities in its endeavours to obtain a better milk supply. Notification is sent to the retailer of every sample found to be unsatisfactory, and leaflets are enclosed pointing out the importance of cleanliness and the proper methods to be adopted in the production and distribution of milk. All possible steps are taken by the Department in the education of milk producers in the improvement and modernisation of their methods.

B. MEAT AND FOOD INSPECTION.

	Veterinary Officer	Meat Inspectors
Visits to public slaughterhouses	291	304
,, private slaughterhouses	1613	464
,, butchers' shops	670	525
,, food-preparing premises	69	15
,, food markets	173	310
,, other premises	37	65
,, under Contagious Diseases of Animals Act	69	11
Number of cattle float inspections	149	573

1. Retail Markets.

Meat is retailed on Saturdays from 14 stalls on the Covered Market from all of which fresh home-killed meat, which has been inspected previously, is sold.

The time has now come when better protection should be afforded for the marketing of food in a more hygienic manner. In an open, exposed market, commodities such as meat, fish, poultry, etc., suffer in consequence of exposure to dust, heat, sun and rain. The canvas screens which butchers are compelled to use are insufficient protection and difficult to keep clean. An enclosed market hall is the only suitable building in which perishable foodstuffs should be exposed for sale.

The daily retail sale of fruit and vegetables is carried on, and warnings have been given on a number of occasions to stall-holders for failure to comply with the Merchandise Marks Act, 1926 (Marking of Imported Foodstuffs).

2. Marketing and Sale of Poultry.

The increasing number of both dressed and undressed poultry exposed for sale in shops and markets demands consideration as to the best means to be adopted so as to safeguard the purchaser against diseased food. The modern intensive methods of poultry farming have resulted in an increase in tuberculosis in poultry, as well as of other infectious conditions associated with poultry breeding. The only adequate safeguard to protect the public and give the proper facilities for examination would be the adoption of a "clearing-house," under the control of the Local Authority, where inspection could be carried out.

3. Fish Markets.

There is a wholesale fish market in the early morning at the L.M.S. Railway station, and there are daily retail sales on the Covered Market. The quality of fish is satisfactory. Two hundred and twenty-nine visits were made during the regular supervision of the wholesale market, and the retail markets are also under close observation. During the year 2,462 tons of wet fish, 259 tons of dry fish, 18 tons of shell fish and 109 tons of rabbits, game, poultry, etc., reached the wholesale markets, and of this amount six tons and two hundredweights were condemned and destroyed.

4. Food-preparing Premises.

The following is a list of food-preparing premises registered in accordance with section 45 of the Preston Corporation Act, 1921 :—

Cooked meat manufacturers	37
Sausage and meat pie manufacturers	96
Tripe dressers	5

Five hundred and forty-five visits of inspection were made by the Sanitary Inspectors and 69 by the Veterinary Officer to such premises.

Visits as shewn were made to premises undermentioned under section 72, Public Health Act, 1925 (dealing with the sanitary precautions necessary where food is stored) or the Public Health (Meat) Regulations, 1924 (conditions to be observed where flesh meat is sold) :—

	Premises	Visits
Beef and pork butchers	205	1195
Fried fish shops	163	101
Other premises, including cold stores ...	38	127

The number of fried fish shops is as last year. Consent was given by the Council to the establishment of an additional fish frier during the year, and one went out of business.

5. Private Slaughterhouses.

There are 10 private slaughterhouses, one less than in 1933, subject to annual re-licensing. The premises are under constant supervision, and all bovine and pig carcases are inspected before removal. Details are given in Table IVA.

6. Public Abattoir.

There are still several conditions requiring attention :—

Artificial lighting.
Mess and washing accommodation for slaughtermen.
Storage accommodation for clothing, tools, etc.

The need for these has been stressed in previous reports.

The Slaughter of Animals Act has increased the work and responsibility of the Department in so far as the registration of slaughtermen and their supervision is concerned. One slaughterman was reported for an offence under the Act, and reprimanded.

The electric stunner which has been installed in the pig slaughterhouse has not given satisfaction.

The total number of licensed slaughtermen on the register at the end of this year was 186.

Section 2 of the Slaughter of Animals Act, 1933, with regard to the mechanical stunning of sheep and lambs was adopted in June, 1934, by resolution of the Council. The captive bolt pistol has given satisfaction in the slaughter of all animals. An electric stunner is preferable for small animals.

C.—DISEASES OF ANIMALS ACTS, 1894-1927.

The inspection of livestock at the Cattle Market and other premises in order to control diseases scheduled under the above Acts has necessitated 344 visits.

1. Anthrax.

One case of anthrax was discovered during the year in the carcase of a young bull which had been killed and dressed in the country and had been brought into the abattoir for inspection.

The discovery of this case resulted in a prosecution in which the defendants were found guilty of a breach of the Anthrax Order, 1928, and fines were imposed.

Numerous microscopical examinations of the blood of suspected animals and of animals which died in transit were made, as a precaution and in order to prevent the spread of infection.

2. Foot and Mouth Disease.

Again there is a slight reduction in the number of outbreaks in England and Wales, the total number being 79, as against 87 in the previous year. These outbreaks involved the slaughter of 10,302 animals (cattle, sheep and pigs). There were no cases in the Borough.

3. Parasitic Mange.

One case of this disease occurred during the year, and the animal was kept under restrictions until cured.

4. Sheep Scab.

There have not been any cases reported in the Borough. Constant lookout is kept while inspecting live sheep in the Market, and there has been no evidence of sheep actually affected with the disease having been exposed within the Market. On account of the prevalence of the disease in the West Riding and adjoining counties, in-contact sheep frequently pass through the Market, and all precautions are taken against the spread of infection.

5. Tuberculosis.

Four animals have been dealt with under Article 1 of the Tuberculosis Order, 1925. £8 was paid in compensation, and salvage realised £2 10s. 0d. Half of the net amount is borne by the Ministry of Agriculture and Fisheries.

Under Article 12 all live bovines exposed for sale at the Cattle Market are inspected, and during the year 18 were dealt with.

Under Article 5, 47 animals were sent in for slaughter for food purposes by other local authorities, and were submitted to detailed inspection before release. These animals were accompanied by Form D of the Order. In addition, 234 bovines were removed from the area of surrounding local authorities to the knacker yard, where they were slaughtered under the Tuberculosis Order.

This Authority is responsible for the examination of all those animals slaughtered for food purposes. Their numbers and classification are given in Table IVD. and the condemnations are included in the general table.

6. Epizootic Abortion.

Efforts to prevent the spread of this serious disease are in operation at the Cattle Market, both in the matter of isolation of suspected animals and the disinfection of premises.

7. Swine Fever.

Owing to the prevalence of this disease in Lancashire, the County was declared a swine fever infected area on December 28th, 1933, and the Order remained in force until April 6th, 1934, when it was removed as a result of a subsidence in the number of outbreaks.

During the summer months, however, the disease again became prevalent, and there was ample evidence that the uncontrolled movement of store pigs to and from markets was largely responsible. The Lancashire Swine Fever Infected Area Order, 1934 (dated December 20th) came into operation on January 1st, 1935.

An unfortunate outbreak occurred in the Public Institution Farm at Fulwood, on which a full report has been made to the Ministry of Agriculture and Fisheries, and to the Master of the Fulwood Institution.

Two suspected cases were dealt with during the year, neither of which, upon investigation, was confirmed, and the restrictions under Form A imposed on both these premises were eventually withdrawn.

8. Rabies.

The country continues free from this disease. Under the importation of Dogs and Cats Order, 1928, dogs and cats arriving in this country are detained for six months quarantine as a safeguard against any importation of the disease from abroad. Performing dogs are exempt from this detention, but remain on licence under control of the Authorities.

9. Orders issued by the Ministry of Agriculture and Fisheries.

With the exception of Orders dealing with Sheep Scab and the movement of Sheep in the Pennine Range, there were no Orders of serious importance issued during the year apart from the Lancashire Swine Fever Orders, 1933-1934.

Copies of the chief Orders dealing with Contagious Diseases of Animals are kept posted on the notice-board erected for this purpose at the entrance to the Cattle Market.

Date of issue, 1934.	Title of Order.
Jan. 22.	Sheep Scab (Amendment) Order, 1934.
Feb. 23.	Pennine Range (Movement of Sheep) Order, 1934.
Mar. 17.	Amendment of the Animals (Importation) Order, 1930.
,, 17.	Foreign Hay and Straw (Amendment) Order, 1934.
,, 22.	Pennine Range (Movement of Sheep) Order, 1934.
Apl. 5.	North Uist (Movement of Sheep) Order, 1934.
May 2.	Application of Part II of Sheep Scab Order, 1928, to parts of the Counties of Kent and East Sussex.
,, 11.	Application of Part III of Sheep Scab Order, 1928, to areas described in the Pennine Range (Movement of Sheep) Order, 1934.
,, 11.	Application of Parts II and III of the Sheep Scab Order, 1928, to parts of the Counties of Caernarvon, Denbigh, Flint, Merioneth and Montgomery.
,, 11.	Application of Parts II and III of the Sheep Scab Order, 1928, to parts of the Counties of Stirling, Perth and Dumbarton.
Sept. 12.	Sheep Scab (Amendment) Order, 1934 (No.2).
,, 25.	Pennine Range (Movement of Sheep) Order, 1934 (No. 3).
,, 25.	Application of part of the Sheep Scab Order of 1928 to areas described in the Pennine Range (Movement of Sheep) Order, 1934.
Oct. 4.	Amendment of the Animals (Importation) Order, 1930.
,, 4.	Foreign Hay and Straw (Amendment) Order, 1934 (No. 3).
,, 30.	Amendment of Pennine Range (Movement of Sheep) Order, 1934.
Dec. 20.	Lancashire Swine Fever Infected Area Order, 1934.

10. Market Sales and Lairs Order, 1925.

In order to comply with this Order, frequent inspections are made of the Auction Mart, railway loading dock, cattle trucks and other lairs adjoining the Cattle Market. To facilitate the proper compliance with this Order, it has again been necessary to stress the unsatisfactory condition of the surfacing of several parts of the open Cattle Market, and until these recommendations have been complied with, proper disinfection of such premises is not possible.

11. Transit of Animals (Amendment) Order, 1931.

The supervision of about 100 cattle vehicles operating from the market necessitates considerable time being spent by your Veterinary Officer and Meat Inspector.

The construction of vehicles, the use of side-rails when loading cattle, and the efficient cleansing and disinfection after use are the chief provisions of the Order. A washing plant is established on the Abattoir premises, and on sale days one man is needed to work the plant and collect the toll—6d. per vehicle—each time it is washed. On account of the congestion of traffic in the Abattoir premises, it is recommended that this washing station be moved to another part of the Market.

Five hundred and seventy-three inspections were made, and nine written orders to cleanse were served, in addition to numerous verbal warnings.

12. Importation of Livestock from Ireland under the Animals (Landing from Ireland, etc.) Order, 1933.

The following animals were landed at the Port of Preston during the year :—Sheep, 38,498; cattle, 25,662; pigs, 299; asses, 13; horses, 5; a total of 64,477. There were 58 casualties during the year—52 sheep and six cattle. A Veterinary officer of the Ministry of Agriculture and Fisheries inspects the animals upon arrival, and any animals unfit to travel are slaughtered under his direction and the carcases are inspected by officers of this Local Authority.

13. Protection of Animals Act, 1911.

During the year 32 pigs, three cattle and two calves were removed from the Market on account of their unfit condition for exposure for sale, and the owners warned. The above Act relates to the movement and exposure of young calves, and store pigs suffering from various forms of rickets, the overstocking of dairy cattle, and the movement of animals suffering from injuries. Overstocking of cows occurred in 17 instances throughout the year, and warnings were issued.

14. Poultry Act, 1911.

The Conveyance of Live Poultry Order, 1919, made under the above Act, provides for the (a) protection of live poultry from unnecessary suffering when travelling or exposed for sale, and (b) cleansing and disinfection of receptacles and vehicles.

Inspection of the weekly poultry market has taken place each Saturday morning, when both containers and livestock have been regularly looked over. Warnings have been given re the cleansing and disinfection of crates on two occasions.

15. Prosecutions undertaken during the year.

Two prosecutions were taken for the exposure of diseased fowls, both cases being dismissed.

Transit of Animals (Amendment) Order, 1931.—A cattle dealer was summoned (1) for not using, (2) for not carrying, cattle rails on his float. The case was dismissed on payment of 4/- costs on each charge.

Animals Landing from Ireland Order, 1933.—One prosecution was taken under this Order, and the defendant was found guilty and fined 10/-.

D.—FOOD AND DRUGS (ADULTERATION) ACT, 1928.

Two hundred and thirty-three samples of various foods and drugs were submitted for analysis during the year, and 15, or 6.44 per cent., were found to be adulterated, compared with 7.9 per cent. in 1933 and 5.2 per cent. in 1932. The following summary shews details of samples taken :—

	MILK			WINES AND SPIRITS			DRUGS		
	Number examined	Number adulterated	Percentage adulterated	Number examined	Number adulterated	Percentage adulterated	Number examined	Number adulterated	Percentage adulterated
Number of Samples ...	102	9	8·82	8	3	37·5	12	...	...
Informal	37	3	8·11	6	1	16·67	12	...	...
Formal ...	65	6	9·23	2	2	100·00	...	...	...

	OTHER ARTICLES			TOTAL			
	Number examined	Number adulterated	Percentage adulterated	Number examined	Number of samples per 1000 of population	Number adulterated	Percentage adulterated
Number of Samples ...	111	3	2·70	233	1·98	15	6·44
Informal	110	3	2·72	165	...	7	4·24
Formal ...	1	...	...	68	...	8	11·76

Milk.

A cautionary letter was sent by the Town Clerk in all cases where the analysis of the formal sample shewed the milk to be unsatisfactory.

Wines and Spirits.

In the two instances where the analysis of the formal samples shewed adulteration, a cautionary letter was sent by the Town Clerk drawing the attention of the vendor to such result and warning him that proceedings would be taken in any future similar case.

Other Articles.

Personal visits were made to vendors when the analysis of informal samples was unsatisfactory.

Ice Cream.

Number of persons selling ice cream	180
Number of persons manufacturing ice cream ...	157

Thirty-three visits were made to traders' premises, which were found to be satisfactory in all cases.

Margarine.

Since 1900 35 firms have been entered in the register; of this number, 21 are still in business.

E.—ACTION TAKEN UNDER OTHER ACTS.

1. Fertilisers and Feeding Stuffs Act, 1926.

There are eight firms selling fertilisers only, 12 feeding stuffs only, and five both feeding stuffs and fertilisers, a total of 25 traders, who are dealing with approximately 2,000 tons of fertilisers and 32,000 tons of feeding stuffs.

Twenty-one samples of feeding stuffs and one sample of fertiliser were submitted for analysis. Ten samples of feeding stuffs were incorrect, as they were not in accordance with the statutory statement, giving a percentage of 59.09 correct, compared with 46.0 per cent. in 1933 and 58.94 per cent. in 1932. Visits were made to the vendors to draw their attention to these errors.

Since the Act came into force, no request has been made for a formal sample to be taken.

2. Merchandise Marks Act, 1926.

Since last year's report, Bacon and Ham, Dead Poultry and Meat have been added to the articles dealt with by Orders in Council made under this Act, and below is given a list of such Orders :—

	No. of Order.	Date of Application.	Articles to which Order applies.
No. 1 Order	128	1932	Butter.
No. 3 Order	571	1928	(a) Honey; (b) fresh apples.
No. 4 Order	1180	1929	Raw tomatoes.
No. 5 Order	1052	1928	(1) Currants, sultanas and raisins. (2) Eggs in shell. (3) Dried eggs. (4) Oat products.
No. 6 Order	554	1931	Frozen or chilled salmon and sea trout.
		1930	Malt products.
No. 3 Order	299	1934	Bacon and ham (not cooked, canned or potted prior to importation).
No. 5 Order	301	1934	Dead poultry (i.e. ducks, fowls (excluding guinea fowl), geese and turkeys).
No. 7 Order	727	1934	Meat.

One hundred and ninety-eight visits to shops were made and a number of verbal warnings given where the Orders were not being properly complied with. A warning letter was sent in one instance.

APPENDIX TO SECTION IV.

TABLE IVA.

Number of Animals Slaughtered and Inspected with Increase or Decrease as compared with 1933.

	Cattle		Sheep		Pigs		Calves	
	Killed	Inspd*	Killed	Inspd*	Killed	Inspd*	Killed	Inspd*
Public Abattoir ...	3975 *+496*	3985 *+502*	27969 *-1448*	28031 *-1496*	2922 *-245*	3571 *-252*	673 *+31*	676 *+27*
Private Slaughter-houses	2659 *+52*	2659 *+52*	16003 *-2737*	14120 *-1327*	2876 *+347*	7971 *+463*	177 *+6*	177 *+5*
Totals	6634 *+548*	6090 *+554*	43972 *-4185*	44974 *-2823*	5798 *+102*	11542 *+211*	813 *+37*	821 *+32*

*Country-dressed carcases submitted for inspection are responsible for the increase shewn in the number of animals inspected as compared with the number killed.

TABLE IVb.

The weight (lbs.) of meat condemned, the cause of condemnation, and the class of animal.

Disease	Cattle	Sheep	Pigs	Calves
Abscess	864	13	395	13
Actinomycosis	985	...	...	...
Anaemia	260	101	...	...
Angioma (Liver)	394	...	...	...
Anthrax	500	...	...	...
Arthritis (including Septic Arthritis)	1527	13	190	172
Asphyxia	...	392	...	...
Bone Taint	176	...	...	...
Bruising and Fractures	5555	106	765	256
Cirrhosis (Liver)	476	...	705	...
Congestion	323	25	94	...
Contamination	12	...	259	...
Cysts (including parasitic conditions)	362	262	519	1
Decomposition	611	447	687	120
Distomatosis	16024	993	...	...
Dropsy and Emaciation	19482	999	1204	1696
Emphysema	62	...	...	...
Enteritis (Acute)	...	50	...	155
Epithelioma	35	...	...	...
Fatty Degeneration (Liver)	216	7	...	...
Fevered and Physicked	11956	104	772	475
Immaturity	...	25	80	2483
Jaundice	480	...	703	...
Johné's Disease	2631	...	...	...
Lymphadenitis, Caseous	...	64	...	...
Mammitis (Septic)	6185	105	256	...
Mastitis	2140	...	24	...
Melanosis	...	...	...	8
Metritis (Septic)	6416	112	246	...
Moribund	...	2137	282	160
Moulds	...	55	...	...
Necrosis	27	5	146	...
Nephritis	538	...	9	...
Oedema	467	36	47	...
Pericarditis (Septic)	1030	...	...	...
Peritonitis	1315	62	289	58
Pneumonia, Pleurisy and Pericarditis	2288	28	1024	146
Pneumonia (Septic)	2977	...	722	118
Pyaemia	770	...	204	...
Rickets with Malnutrition	...	...	144	...
Septicaemia and Cellulitis	6077	32	805	...
Swine Erysipelas	...	...	1437	...
Swine Fever	...	...	4457	...
Tuberculosis	161346	...	27879	1570
TOTALS	254507	6173	44344	7431

TABLE IVc.

Number of Animals inspected at Cattle Market and Saleyards, with comparative figures for the four preceding years.

	Cattle	Sheep	Pigs	Calves	Horses	Totals
1934	48942	132218	38449	15238	1438	236285
1933	44363	139386	52480	13391	1392	251012
1932	45983	119591	54252	11654	1392	232872
1931	43342	105525	39856	10574	1286	200583
1930	50359	114886	27613	13287	1011	207153
Other Premises—						
1934	1017	......	150	20	450	1637
1933	490	......	118	......	117	725
1932	587	......	120	......	90	797
1931	692	......	335	......	96	1123
1930	411	......	90	......	30	531
Increase or Decrease in 1934 on 1933 ...	+5106	−7168	−13999	+1867	+379	−13815

TABLE IVd.

Animals dealt with under the Tuberculosis Order, 1925.

Animals suffering from Tuberculosis	Total	Giving T.B. Milk.	Suffering from		Chronic Cough and shewing definite clinical signs of T.B.
			T.B. Udder	T.B. Emaciation.	
Sent in by Local Authorities	47	18	19	1	9
Removed from Cattle Mart	18	...	10	...	8
Discovered during routine inspection of dairy herds in the Borough	4	...	...	...	4

In addition to the above figures, 234 animals were received at the knacker-yard from surrounding districts.

TABLE IVE.

Carcases and Organs condemned for Tuberculosis and other Conditions, 1934.

Animal	Whole Carcases	Head	Lungs	Liver	Heart	Spleen	Kidney	Udder	Stomach	Skirts	Mesen-tery	Intes-tines
Tuberculosis.												
Cattle ...	190	479	2104	332	136	95	218	147	71	103	222	125
Pigs ...	41	868	894	813	830	20	73	...	67	...	186	124
Calves ...	8	2	32	22	24	2	4	...	...	...	4	1
Other Conditions.												
Cattle ...	143	44	121	1148	15	8	38	530	18	5	10	11
Sheep ...	135	10	46	476	34	...	...	...	...	...	...	...
Pigs ...	109	15	365	365	315	31	93	14	164	...	156	134
Calves ...	78	1	35	35	35	...	4	5	...	...	2	5

V.—Prevalence of, and Control over, Infectious Diseases.

A.—GENERAL.

The year has been characterised by a continuation of the epidemic of measles which began in November, 1933. There has also been a serious outbreak of diphtheria, which began in the autumn of the year and continued throughout the first four months of 1935.

Scarlet fever continued at the high level which was first noticed in 1932.

Erysipelas has been more frequently notified than for several years.

Chicken pox was much more extensively prevalent than in the previous year.

The mortality from infectious diseases was, with the exception of diphtheria, practically negligible.

1. Diphtheria.

	1934	1933	1932	1931	1930
No. of cases notified	220	24	38	64	152
No. of deaths	8	1	1	4	7
Case incidence per 1,000 population	1.88	0.204	0.32	0.53	1.20
Mortality per 1,000 population ...	0.068	0.008	0.008	0.033	0.056
Mortality per cent of cases notified	3.63	4.17	2.63	6.25	4.61

After several years of the practical absence of diphtheria as a cause of illness and death among Preston children, a smart outbreak occurred in September and, increasing in October, assumed alarming proportions in December, thereafter declining gradually during the Spring of 1935.

The disease is mainly one affecting children under 10 years of age. There was, however, one fatal case in a patient in the 45—65 group. Sexes were equally affected. The incidence of the disease fell most heavily on the Western and Central portions of the town. Park Ward had an unenviable precedence in the number of cases notified.

The type of disease during the 1934 part of the epidemic seemed to be of a mild variety, reacting well to treatment by serum. In the Spring, however, cases of an unusual severity, especially of the laryngeal and nasal types, resistent to treatment, began to appear, and the case mortality began to rise on a somewhat alarming scale. The epidemic, however, had the same abrupt termination as had characterised its onset. Several of the infants' departments of the elementary schools suffered a particularly heavy visitation. Thus there were in the whole epidemic 21 cases in the English Martyrs' Infants, eight in the Frenchwood Junior Department, and seven in the Deepdale Council Infants.

These cases caused a good deal of anxiety and necessitated a daily visit by the Assistant School Medical Officer for the purpose of examining contacts, cases of sickness in the schools, and in some cases visits to the homes of absentees, about the cause of whose absence the Head Teacher had no information. The number of deaths in 1934 was, fortunately, low, and the case mortality was much below that of towns where the type of disease was more severe.

2. Scarlet Fever.

	1934	1933	1932	1931	1930
No. of cases notified	320	324	394	175	206
No. of deaths	2	—	1	1	1
Case incidence per 1,000 population	2.73	2.75	3.32	1.44	1.63
Mortality per 1,000 population ...	0.017	—	0.008	0.008	0.008
Mortality per cent. of cases notified	—	20.0	—	11.1	50.0

Scarlet fever was the cause of illness in 320 persons. This number is approximately the same as the numbers notified in the previous two years. The disease was spread out over the whole year and, geographically, affected the whole town, with the most cases in Deepdale Ward. As the disease is mainly one affecting children up to 10 years of age, this selection of a Ward with a large amount of building development, mainly for families with young children, is not surprising.

One of the deaths was that of a man of 38 years who was in the last stages of chronic kidney disease, with superadded scarlet fever, and who died a few hours after admission to the Isolation Hospital. The other death was that of a boy of 10 who had an acute infection of the shin bone, with extension to the knee joint, with a co-existent scarlet fever. He also died in the Isolation Hospital.

3. Enteric Fever.

	1934	1933	1932	1931	1930
No. of cases notified	1	5	9	9	2
No. of deaths	—	1	—	1	1
Case incidence per 1,000 population	0.009	0.042	0.075	0.075	0.016
Mortality per 1,000 population ...	—	0.008	—	0.008	0.008
Mortality per cent. of cases notified	—	20.0	—	11.1	50.0

Two cases of enteric fever were notified. One of these proved to be a case of Malta fever and, on establishment of the diagnosis, the notification was withdrawn. The remaining case satisfied the blood and cultural tests, was mild in character, and made a good recovery.

4. Erysipelas.

Erysipelas was notified on 68 occasions. Twenty cases were treated in the Isolation Hospital. There were three deaths, one of which was due to puerperal sepsis following premature labour, due to cellulitis of the arm, and occurred at the Isolation Hospital.

5. Pneumonia.

One hundred and ten cases were notified. Ninety-four deaths occurred from all forms of pneumonia, compared with 125 in the previous year, and 21 from influenzal pneumonia, compared with 63 last year. Notification of pneumonia is incomplete and unsatisfactory.

6. Encephalitis Lethargica.

Four further cases of this disease were notified during the year. No deaths were attributed to this cause. A report on the condition of health of the survivors among all cases notified to the Health Department, numbering 31 persons, was given in the report for 1931.

7. Acute Anterior Poliomyelitis.

No new cases of acute poliomyelitis (infantile paralysis) were notified.

8. Infective Enteritis.

Notification of infective enteritis is even less complete than that of primary and influenzal pneumonia. One notification was received. Seven children under two years of age died of the disease.

9. Chicken Pox.

Chicken pox has continued in epidemic form during the whole year, and 436 cases were notified. Compulsory notification by medical practitioners and parents ceased to be effective at the beginning of September. The disease caused no mortality.

10. Measles.

The epidemic of measles which began in November, 1933, continued during the winter and spring months, a high number of cases occurring in February, and the disease dying out towards the end of March. The epidemic affected all parts of the town, with a notable excess in Deepdale, Park and St. Peter's Wards. Measles is a disease of children under 10, and mostly affects children between two and five. There were 26 deaths, 22 of which were under five years of age. Ninety-eight cases were removed to the Isolation Hospital on account of either bad home conditions or serious complications such as broncho-pneumonia. Hospital accommodation for this class of case of measles is of the greatest value and saves many lives.

11. Small Pox.

There were no cases.

Tables relating to vaccination appear in the Appendix to this Section.

12. Whooping Cough.

Whooping cough did not reach epidemic form during the year; the 38 cases which came to our notice occurred mainly in January and February. There were three deaths, all being children of five years and under.

B.—ISOLATION HOSPITAL.

1. Six hundred and six cases were admitted, as compared with 390, 459, 325, 374 and 459 in previous years. Seventeen patients died, the disease for which they were admitted being, one scarlet fever, three erysipelas, seven diphtheria, and six measles.

The aid of a surgeon was called in on five occasions for the performance of mastoidectomy (2), tracheotomy (2) and osteomyelitis. The total number of operations performed was as follows :—

Mastoidectomy	2
Retropharyngeal Abscess ...	1
Parotid Abscess	1
Tracheotomy	15 (4 fatal)
Abscess in neck	4
Osteomyelitis	1 (fatal)

Classification of cases, length of stay and other details may be found in the tables of the Appendix to this Section.

Members of the Committee will have noted how that the scope of our work has increased in recent years. The Hospital was built for the reception of cases of enteric fever, scarlet fever and diphtheria, but we are actually dealing with many other infectious and contagious conditions.

Parents and relations are so accustomed to the idea of children with a severe attack of measles going into hospital that they feel a grievance if denied—through pressure of other diseases on the hospital accommodation—the convenience of hospital treatment. Further, cases of the principal diseases are removed on public health grounds and not, as formerly, merely on the request of the patient's relations. Since September last we have experienced a large epidemic of diphtheria, together with a more than average amount of scarlet fever. The accommodation in consequence has been fully taxed, and a few cases which, under ordinary circumstances, would have been removed to hospital, have been treated at home. Under circumstances as at present existing we could offer no accommodation for severe cases of measles—a class of case which benefits very greatly by hospital treatment. The time is coming, I think, when your Committee should begin to consider the advisability of extension.

2. Enteric Fever.

Two cases were admitted, as compared with four, seven and nine in the previous three years. Of the two original cases notified as suffering from enteric fever, one was regarded as a case of undulant fever. Both were nursed at the Isolation Hospital and made good recovery.

3. Scarlet Fever.

Two hundred and seventy-two cases were admitted, as compared with 295, 338, 145, 180 and 210 in previous years. One death occurred, a child who was admitted suffering from acute osteomyelitis of the tibia, with extension of the infection to the knee joint. Ten cases on return home gave rise to subsequent cases, the discharge from hospital being followed by another case in the same household. The average interval between discharge of the original cases and the occurrence of secondary cases was 24 days, the shortest interval being six days and the longest 43 days. The ten secondary cases represent 3.81 per cent. of the 262 primary cases, as compared with 3.87, 4.32, 3.57 and 1.77 in previous years.

Eleven patients were found not to be suffering from scarlet fever. Two had measles, one eczema, one german measles, one septic tonsillitis, and one diphtheria.

4. Diphtheria.

Two hundred and one cases were admitted, as compared with 23, 37, 65, 145, 108 and 224 in previous years. There were seven deaths. One of these was due to the severity of the toxæmia in a case in which treatment was delayed. Three deaths followed tracheotomy. In one of these cases the patient did not seek medical aid until a serious difficulty in breathing was experienced. The doctor immediately brought the patient to hospital in his own car, and although an operation was performed at once, the patient expired before anything could be done. One death occurred in a patient not suffering from diphtheria, who died of meningitis. One, not suffering from diphtheria, was dying, when admitted, of advanced kidney disease, and one died of pneumonia following diphtheria. It will be seen that the type of disease was mild.

Antitoxin is administered by the intra-muscular route. The majority of the patients have been given a preliminary dose of 8,000 units before admission. In 19 cases no further treatment was considered necessary, but in the remainder further dosage, according to the severity of the disease, was given as below :—

No. of Patients.	Units of Serum.	No. of Patients.	Units of Serum.
1	92,000	21	32,000
1	80,000	18	24,000
6	64,000	44	16,000
1	56,000	2	12,000
3	48,000	80	8,000
2	46,000	2	4,000
1	36,000		

The cost of antitoxin used at the Hospital and supplied free of charge to medical practitioners was over £200.

One hundred and fifty-eight of the cases presented clinical and bacteriological signs of diphtheria; 15 presented no clinical signs, but had positive swabs. In 11 instances the clinical signs were those of diphtheria, but this was not supported by the swab examination, while 17 presented neither clinical nor bacteriological evidence of the disease. Among the 17 such cases there were two cases of follicular tonsillitis and one each of retropharyngeal abscess, measles, uræmic coma, scarlet fever, severe head cold, meningitis, quinsy and erysipelas.

5. Measles.

Ninety-eight cases were admitted, as compared with 23, 29, 26, 5 and 69 in previous years. Six deaths occurred.

6. Erysipelas.

Twenty cases of erysipelas and of septic condition of the tissues following injuries or other diseases were admitted. There were three deaths, one of which was due to puerperal sepsis following premature labour, precipitated by cellulitis of the arm.

7. Pneumonia.

No cases were admitted.

8. Other Diseases.

Thirteen cases were admitted in this miscellaneous group, as compared with 29 last year. They were classified as follows :—

Ophthalmia Neonatorum	5	Whooping Cough	1
Chicken Pox	3	Impetigo	1
Mumps	2	Septicæmia ... (P.U.O.)	1

No deaths occurred.

C.—TUBERCULOSIS.

1. Incidence and Mortality of the Disease.

In the year under review the total number of cases of tuberculosis (all forms) notified in Preston was 181 (primary notification on Form A).

Of these notifications, 133 were pulmonary and 48 non-pulmonary cases. These figures show a slight increase over those of the previous year, when 163 notifications were received. The relative incidence of the two forms of the disease has altered somewhat from that of the previous year, the pulmonary cases having increased by 37 and the non-pulmonary cases being less by 19.

The above figures give a notification rate of 1.54 per 1,000 of the population for all forms of the disease. Of this rate the pulmonary form is responsible for 1.13 and the non-pulmonary form for .41 per 1,000 of the population.

The above figures indicate a slight check to the small annual diminution in the incidence of the disease which has been recorded for the past few years.

The age and sex distribution of the notified cases (primary notifications on Form A), the relative incidence in the different Wards of the Borough, and the occupations of the notified cases, will be found in Tables Va, Vb and Vi respectively.

Turning to the mortality from the disease, we find that during 1934 the number of deaths registered in Preston as being due to tuberculosis in some form or other was 99. Of the total deaths, 85 were due to the pulmonary form of the disease and 14 were caused by other forms of the disease.

The total number of deaths (99) is exactly the same as for the previous year, though the relative distribution between the different forms of the disease has varied slightly.

The corrected death rate from the disease (all forms) was .92 per 1,000 of the population. The pulmonary form was responsible for a rate of .79, while the other forms of the disease caused a rate of .13 per 1,000 of the population.

The ratio of deaths of non-notified persons to the total deaths was as one to five. The majority of those cases not notified before death were either very acute cases who were under their doctor for only a very short time, or were cases admitted to hospital, where the diagnosis was only definitely established by post-mortem examination.

The age and sex distribution of the deaths from tuberculosis is shewn in Table Id.

2. Work done during the year.

The following is a summary of the work carried out during the year under the Dispensary Organisation :—

(a) At the Dispensary.

During the year 378 new patients were examined by the Tuberculosis Officer, either at the Dispensary or at their own homes.

Old patients made 2,291 attendances at the Dispensary for treatment, reports, or observation purposes.

Of the new patients, 179 were diagnosed as suffering definitely from tuberculosis in some form or other, 129 from pulmonary and 50 from non-pulmonary tuberculosis.

The pulmonary cases were classified as follows :—

T.B. –	70
T.B. + Group 1	24
T.B. + Group 2	26
T.B. + Group 3	9
	129

The explanation of the above groupings is as follows :—

Class T.B. – comprises cases of pulmonary tuberculosis in which the tubercle bacilli were never actually found in the sputum examinations.

T.B. + comprises all the other cases in which the presence of tubercle bacilli in the sputum had been demonstrated at some period or other of the disease. This latter class is further sub-divided into Groups 1, 2 and 3, corresponding approximately and respectively to early, intermediate and advanced stages of the disease.

The non-pulmonary cases were classified as follows :—

Bones and Joints	21
Abdominal	4
Peripheral Glands	24
Other Organs	1
	50

The tuberculosis nurse made 170 visits to the homes of new patients and 1,983 re-visits to those of old patients.

Table VJ shows in detail, as required by the Ministry of Health, the work done at the Dispensary. This table explains itself and requires little comment, except to say that the addition of the figures in Section D gives a total of 565 cases actually on the Dispensary register at the end of the year. Of these patients 189 were " arrested " cases (88 pulmonary and 101 non-pulmonary). An " arrested " case means a patient who has remained free from any signs of active tuberculous disease for a period of at least two years. If the " arrested " case continues to remain well for a further period of three years (pulmonary) or one year (non-pulmonary), he can then be removed from the Dispensary register and regarded as permanently cured.

Each year a considerable number of such cured cases are removed from the register (98 during the year 1934).

It will be observed also from this table that 211 X-ray examinations were carried out in connection with the Dispensary organisation.

This X-ray work has for several years been carried out at the Preston Royal Infirmary by the honorary radiologists of that institution.

While this work has been very satisfactorily performed under the existing arrangement, it would undoubtedly be of great advantage for the department to have its own X-ray equipment. The scope of this work, which has in recent years become of very great use in the diagnosis and treatment of the disease, could then be greatly extended.

(b) The Chestnuts Sanatorium.

There are no important developments to record in connection with this institution during the year under review.

An analysis of the cases receiving treatment at the Sanatorium during the year will be found in Tables VG and VH. These tables show the number of patients admitted during the year, their average length of stay, and the average number of beds occupied daily. It will be observed that 64 patients were admitted, 47 discharged and 17 died in the institution during the year.

The total number of patients admitted approximates closely to that of the previous year, and varies little from year to year. The number of deaths, however, is considerably below that of the previous year, when 26 patients died in the institution. The age and sex distribution of the patients also shows little variation.

It must always be remembered that in an institution of this type curative results can be looked for only in a very small percentage of cases. The reason for this is that the majority of cases admitted are of the advanced and acute type, and, as such, are usually not fit to be sent to other sanatoria which deal mainly with early cases in which there is a reasonable prospect of cure.

A scheme of occupational therapy, on very modified lines, has functioned for some years. Its use, however, is of necessity limited and intermittent, owing to the comparatively small number of patients who are able to take advantage of it.

The Sanatorium is once more very grateful to all those who have so willingly contributed to the patients' happiness by providing entertainments of various kinds during the winter months.

(c) Residential Treatment.

The average number of beds available to the Corporation during 1934 for the treatment of all forms of tuberculosis, the extent of residential treatment, and the immediate results of such treatment, are shown in Tables VF and VK respectively.

Public Health (Prevention of Tuberculosis) Regulations, 1925.

There was no known instance during the year in which a tuberculous person was engaged in the milk trade.

Public Health Act, 1925. Section 62.

There was no instance in which the Council applied for an order for compulsory removal to hospital of a tuberculous person.

D. VENEREAL DISEASE.

The number of persons attending the Venereal Diseases Centre at the Preston Royal Infirmary for the first time (640) agrees very closely with the number in previous years—644 and 653 respectively. In the following paragraphs the numbers and percentages for 1933 and 1932 respectively are given in brackets.

Syphilis.

The number of persons presenting themselves for treatment for the first time, including 17 who were known to have received treatment at other Centres for the same condition was 167 (166, 179); 13% of the total cases were in the primary and more easily treated stage (21%, 11%); 35% of the cases were females (22%, 36%).

Fifty-five (31, 32) cases were discharged after completion of treatment and final tests of cure. Ninety-one (53, 61) persons ceased to attend before completion of treatment; 22 of these were in the primary or secondary stages and in an infectious state.

These cases of syphilis made 5,488 attendances (5,606, 6,501). The average attendance of cases was 12.5 (14.5, 16.3) in the case of men, and 10.7 (11.6, 15.0) in the case of women. One person was treated as an in-patient for 31 days.

Two thousand and seven injections of approved arseno benzene compounds were administered, as compared with 2,278 in 1933; 2,994 c-c. bismuth injections were given in addition.

Gonorrhœa.

Three hundred and thirty-eight persons (375, 367) attended for the treatment of gonorrhœa. A large majority of these were in the early stages of the disease; 31% (32%, 38%) of all cases of gonorrhœa in men were discharged as cured, while 38% (22%, 16%) of women were so discharged. The large proportion of cases ceasing to attend before completion of treatment has been commented on in previous reports. The figures are: Males, 12.9% (11%, 11%) and females 17% (9%, 5%).

Males on the average made seven (nine) visits to the Medical Officer, and 26 (30) visits for treatment by the Medical Orderly. Females made 12 (11) visits to the Medical Officer and 13 (10) visits for treatment by the Sister in charge.

General.

Sixty-two per cent. (63%) of all cases resided in the Borough, the remainder being mainly resident in the adjacent County Area.

In all, 1,267 (1,238, 1,299) persons made 26,989 (29,228, 28,410) visits to the Clinic for treatment. The film, "Damaged Lives," was shewn for a week at one of the principal cinemas and attracted large audiences.

APPENDIX TO SECTION V.

TABLE Va.—Cases of Infectious Diseases for the Year 1934 classified according to age and sex.

Notifiable Disease.	Under 1 year		1—2		2—3		3—4		4—5		5—10		10—15		15—20		20—25		25—45		45—65		65 and over		TOTAL	
	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F
Diphtheria	...	...	3	3	11	3	13	10	7	15	50	52	11	22	2	3	...	4	5	4	1	1	...	...	103	117
Erysipelas	1	1	...	...	...	...	...	...	1	...	...	1	1	3	...	1	1	2	8	17	12	16	2	1	26	42
Scarlet Fever	6	...	1	8	18	15	11	22	18	17	76	56	17	20	7	1	5	8	5	8	...	1	...	...	164	156
Enteric Fever	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	1	...	...	...	1
Puerperal Fever	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	3	...	1	...	...	...	4
Pyrexia (Puerperal)	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	6	...	25	...	...	...	...	...	31
Ophthalmia Neonatorum	3	5	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	3	5
Pulmonary Tuberculosis	...	...	...	...	...	1	...	...	1	1	6	8	3	6	1	8	7	10	23	22	29	6	1	...	71	62
Other Forms of Tuberculosis	...	...	...	1	...	5	...	...	2	1	7	4	5	4	1	1	1	4	1	9	1	1	...	...	18	30
Influenzal Pneumonia	..	...	...	...	...	...	..	...	...	...	...	...	...	...	...	...	...	...	...	...	3	1	2	...	5	1
Primary Pneumonia	4	6	8	4	5	5	2	4	1	2	7	7	3	4	7	...	2	3	10	6	10	3	5	2	64	46
Malaria	...	..	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
Dysentery	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
Cerebro Spinal Fever	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	1	...	...	...	...	...	1	...
Encephalitis Lethargica	...	...	...	...	...	...	...	...	...	...	...	...	...	...	1	...	...	...	1	...	...	2	...	...	2	2
Acute Poliomyelitis	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
Infective Enteritis	...	...	1	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	1	...
Chicken Pox (not notifiable)	4	1	6	5	10	10	19	10	34	22	153	140	8	12	2	...	...	...	...	...	...	...	...	...	236	200
Measles	42	47	96	94	131	105	187	179	242	250	380	386	17	20	3	7	2	3	2	2	...	...	...	...	1102	1093
Small Pox	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	..
Whooping Cough (not notifiable)	...	...	...	...	...	...	2	2	9	8	9	8	...	...	...	...	...	...	...	...	...	...	...	...	20	18

TABLE Vb.

Cases of Infectious Disease notified in 1934 and classified according to Ward Distribution.

Notifiable Disease.	Total	St. John's.	Avenham.	Christ Church	Ashton.	Maudland.	St. Peter's.	Moorbrook.	Park.	Trinity.	Deepdale.	Ribbleton.	Fishwick.
Diphtheria	220	17	7	6	8	19	15	18	31	19	33	24	23
Erysipelas	68	7	5	2	3	3	4	7	14	5	8	3	7
Scarlet Fever	320	28	9	18	21	33	19	22	35	18	53	28	36
Enteric Fever	1	...	...	...	...	...	1	...	...	...	...	...	...
Puerperal Fever	4	...	...	1	...	...	...	...	1	...	2	...	...
Pyrexia (Puerperal)	31	2	...	1	...	1	...	1	26	...	...	...	...
Ophthalmia Neonatorum	8	1	...	1	1	...	...	...	3	...	2	...	...
Pulmonary Tuberculosis	133	14	9	9	7	12	13	7	16	10	17	17	2
Other Forms of Tuberculosis	48	6	1	3	3	3	2	2	6	5	7	6	4
Influenzal Pneumonia	6	2	...	...	...	...	...	...	1	...	2	1	...
Primary Pneumonia	110	11	3	3	9	8	10	9	9	8	26	8	6
Malaria	...	...	...	...	...	...	...	...	...	...	...	...	...
Dysentery	...	...	...	...	...	...	...	...	...	...	...	...	...
Cerebro Spinal Fever	1	...	...	...	...	...	...	...	...	...	...	1	...
Encephalitis Lethargica	4	3	...	1	...	...	...	...	...	...	...	...	...
Acute Poliomyelitis	...	...	...	...	...	...	...	...	...	...	...	...	...
Infective Enteritis	1	...	...	...	...	...	...	...	...	...	...	1	...
Chicken Pox (not notifiable)	436	35	13	14	47	32	47	21	31	46	67	55	28
Measles	2195	266	98	106	135	192	229	163	235	170	311	173	117
Small Pox	...	...	...	...	...	...	...	...	...	...	...	...	...
Whooping Cough (not notifiable)	38	13	...	3	1	7	4	...	6	...	...	...	4

TABLE Vc.

Cases of Infectious Disease notified in 1934 and classified according to month of occurrence.

Notifiable Disease.	TOTAL	January	February	March	April	May	June	July	August	September	October	November	December
Diphtheria	220	2	7	9	4	8	11	6	6	26	40	29	72
Erysipelas	68	10	10	6	7	3	6	4	2	1	5	7	7
Scarlet Fever	320	30	23	25	24	37	26	22	23	22	35	19	34
Enteric Fever	1	...	...	...	1	...	...	...	...	...	...	...	...
Puerperal Fever	4	...	...	...	1	1	...	...	2	...	...	...	...
Pyrexia (Puerperal)	31	1	2	8	2	7	1	...	3	1	3	2	1
Ophthalmia Neonatorum	8	1	2	...	1	...	1	2	...	...	1	...	...
Pulmonary Tuberculosis	133	10	14	19	15	9	12	8	11	7	4	15	9
Other Forms of Tuberculosis	48	4	6	7	2	5	5	3	3	1	6	5	1
Influenzal Pneumonia	6	1	...	...	...	1	1	1	...	...	...	1	1
Primary Pneumonia	110	14	16	11	11	3	8	5	3	5	7	16	11
Malaria	...	...	...	...	...	...	...	...	...	...	...	...	...
Dysentery	...	...	...	...	...	...	...	...	...	..	...	...	...
Cerebro Spinal Fever	1	...	...	...	...	...	...	...	...	...	1	...	...
Encephalitis Lethargica	4	...	1	...	...	...	...	...	...	...	...	...	3
Acute Poliomyelitis	...	...	...	...	...	.	...	...	...	...	...	...	...
Infective Enteritis	1	...	...	...	...	...	...	...	...	1	...	...	...
Chicken Pox (not notifiable)	436	68	50	90	25	25	45	34	19	8	48	14	10
Measles	2195	853	903	376	36	5	1	4	6	6	2	2	1
Small Pox	...	...	...	...	...	...	...	...	...	...	...	...	...
Whooping Cough (not notifiable)	38	21	11	4	...	...	...	...	...	...	1	..	1

TABLE Vd.

Isolation Hospital.

Disease for which Admitted	In Hospital, Dec. 31st, 1933	Admitted		Dis-charged	Deaths	Remaining in Hospital, Dec. 31st, 1934.
		No.	Per cent. of Cases Notified			
Enteric Fever	...	2	100	2	...	...
Scarlet Fever	24	272	85	271	1	24
Diphtheria	1	201	91·36	147	7	48
Measles	8	98	4·46	100	6	...
Erysipelas	3	20	29·41	20	3	...
Pneumonia	...	...	...	...	...	...
Puerperal Fever ...	...	...	...	...	...	...
Other Diseases ...	...	13	...	13	...	...
Totals	36	606	...	553	17	72

TABLE Ve.

Number of beds occupied daily and length of stay in Hospital of Patients who died or were discharged in 1934, whether admitted in that year or previously.

Disease for which Admitted	No. of Cases Died or Discharged during 1934	Total Days in Hospital	Average Length of Stay in Days	Total Bed Days in Hospital in 1934	Average Beds occupied Daily
Enteric Fever ...	2	48	24	48	0.13
Scarlet Fever ...	272	8881	32.65	8889	24·35
Diphtheria	154	3654	23·73	4459	12.22
Measles	106	1577	14.88	1532	4·19
Erysipelas	23	268	11.65	240	0.66
Pneumonia	...	...	...	...	...
Puerperal Fever ...	...	...	...	...	...
Other Diseases ...	13	250	19.23	250	0.68
Totals ...	570	14678	25·75	15418	42.24

TABLE Vf.

Return showing the extent of Residential Treatment and Observation during the year in Institutions Approved for the treatment of Tuberculosis.

			In Institutions on Jan. 1	Admitted during the Year	Discharged during the Year	Died in the Institutions	In Institutions on Dec. 31
Number of doubtfully tuberculous cases admitted for observation.	Adults	M.	...	1	1	...	...
		F.	...	2	2	...	...
	Children	—	...	...	...	...	...
TOTAL	...		...	3	3	...	...
Number of patients suffering from pulmonary tuberculosis	Adults	M.	24	54	46	14	18
		F.	14	34	31	5	12
	Children	—	7	21	18	1	9
TOTAL	...		45	109	95	20	39
Number of patients suffering from non-pulmonary tuberculosis	Adults	M.	2	9	8	...	3
		F.	2	11	11	...	2
	Children	—	10	22	18	1	13
TOTAL	...		14	42	37	1	18
GRAND TOTAL	...	...	59	154	135	21	57

TABLE Vg.

Chestnuts Sanatorium.

Tuberculosis	In Hospital Dec. 31, 1933	Admitted	Discharged	Deaths	Remaining Dec. 31, 1934
Males	13	37	26	12	12
Females	10	25	20	5	10
Children	...	2	1	...	1
Totals ...	23	64	47	17	23

TABLE Vh

Chestnuts Sanatorium.

	No. of Cases Died or Discharged during 1934	Total days in Sanatorium	Average length of stay in days.	Average Beds occupied daily.
Males	38	4511	118.71	15
Females	26	2379	91.5	11
Totals	64	6890	107.66	26

TABLE VI.

Tuberculosis.

Occupations of notified cases.

Description.	Number.
Under School Age	12
School Children	38
Cotton Operatives	30
Domestic Duties	23
Labourers	12
Clerical Workers	7
Shopkeepers and Assistants	7
Engineers and Mechanics	12
Tailors and Dressmakers	2
Other Occupations	33
No Occupation	5
Total	181

TABLE Vj.

Tuberculosis.

Return showing the work of the Dispensary during the Year 1934.

DIAGNOSIS.	PULMONARY.				NON-PULMONARY				TOTAL.				Grand Total.
	Adults		Children		Adults		Children		Adults		Children		
	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	
A.—NEW CASES examined during the year (excluding contacts) :													
(*a*) Definitely tuberculous	56	43	9	9	6	16	12	14	62	59	21	23	165
(*b*) Diagnosis not completed	...	...	...	...	...	1	...	...	...	1	...	...	1
(*c*) Non-tuberculous	38	56	16	16	2	2	4	4	40	58	20	20	138
B.—CONTACTS examined during the year :													
(*a*) Definitely tuberculous	3	3	...	5	...	2	...	...	3	5	...	5	13
(*b*) Diagnosis not completed	...	...	...	...	...	...	...	...	...	...	...	...	...
(*c*) Non-tuberculous	8	17	14	19	1	...	2	...	9	17	16	19	61
C.—CASES written off the Dispensary Register as :													
(*a*) Recovered	17	22	7	8	5	13	17	9	22	35	24	17	98
(*b*) Non-tuberculous (including any such cases previously diagnosed and entered on the Dispensary Register as tuberculous)	46	73	30	35	3	2	6	4	49	75	36	39	199
D.—NUMBER OF CASES on Dispensary Register on December 31st :													
(*a*) Definitely tuberculous	152	132	34	38	32	51	66	59	184	183	100	97	564
(*b*) Diagnosis not completed	...	...	...	...	...	1	...	...	...	1	...	...	1

TABLE Vj.—(continued).

1. Number of cases on Dispensary Register on January 1st	596	7. Number of consultations with medical practitioners :— (*a*) Personal ... ... (*b*) Other	 10 206
2. Number of cases transferred from other areas and cases returned after discharge under Head 3 in previous years	18	8. Number of visits by Tuberculosis Officers to homes (including personal consultations)	56
3. Number of cases transferred to other areas, cases not desiring further assistance under the scheme, and cases " lost sight of "	61	9. Number of visits by Nurses or Health Visitors to Homes for Dispensary purposes	1983
4. Cases written off during the year as Dead (all causes)	69	10. Number of (*a*) Specimens of sputum, &c., examined (*b*) X-ray Examinations made in connection with Dispensary work	 407 211
5. Number of attendances at the Dispensary (including Contacts) ...	2669	11. Number of " Recovered " cases restored to Dispensary Register, and included in A (*a*) and A (*b*) above...	6
6. Number of Insured Persons under Domiciliary Treatment on the 31st December	98	12. Number of " T.B. plus " cases on Dispensary Register on Dec. 31st	153

TABLE Vk.

Return showing the immediate results of treatment of definitely tuberculous patients discharged during the year from Institutions approved for the treatment of tuberculosis.

Classification on admission to the Institution.		Condition at time of discharge.	Duration of Residential Treatment in the Institution.															Grand Totals
			Under 3 months but exceeding 28 days			3—6 months			6—12 months			More than 12 months			Totals			
			M.	F.	Ch.	M.	F.	Ch.	M.	F.	Ch.	M.	F.	Ch.	M.	F.	Ch.	
PULMONARY TUBERCULOSIS.	Class T.B. minus.	Quiescent	.	2	1	6	4	6	3	1	4	.	.	2	9	7	13	29
		Not quiescent ...	2	3	1	2	3	1	.	.	.	.	.	.	4	6	2	12
		Died in Institution	1	.	1	.	.	.	.	.	.	.	.	.	1	.	1	2
	Class T.B.plus. Group I.	Quiescent	.	.	.	3	2	.	.	.	.	.	.	.	3	2	.	5
		Not quiescent ...	2	.	.	4	2	.	4	.	.	.	.	.	10	2	.	12
		Died in Institution	.	.	.	2	1	.	.	.	.	.	.	.	2	1	.	3
	Class T.B. plus Group II.	Quiescent	.	.	.	1	.	.	.	.	.	1	.	.	2	.	.	2
		Not quiescent ...	3	4	.	6	3	.	3	1	.	.	.	.	12	8	.	20
		Died in Institution	1	1	.	3	.	.	.	2	.	1	.	.	5	3	.	8
	Class T.B.plus. Group III	Quiescent	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.
		Not quiescent ...	1	.	.	1	1	.	.	.	.	.	.	.	2	1	.	3
		Died in Institution	2	.	.	1	.	.	.	.	.	.	.	.	3	.	.	3
TOTALS (pulmonary)...			12	10	3	29	16	7	10	4	4	2	.	2	53	30	16	99
NON-PULMONARY TUBERCULOSIS.	Bones and Joints	Quiescent	1	.	1	.	.	2	.	1	.	.	.	2	1	1	5	7
		Not quiescent ...	.	.	3	.	1	.	2	.	.	.	.	.	2	1	3	6
		Died in Institution	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.
	Abdominal.	Quiescent	.	.	2	.	.	1	.	.	1	.	.	.	.	.	4	4
		Not quiescent ...	.	.	1	.	1	.	.	.	.	.	.	.	.	1	1	2
		Died in Institution	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.
	Other Organs	Quiescent	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.
		Not quiescent ...	1	.	.	.	.	.	.	.	.	.	.	.	1	.	.	1
		Died in Institution	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.
	Peripheral glands	Quiescent	.	2	2	.	.	.	.	.	.	.	.	.	.	2	2	4
		Not quiescent ...	.	1	2	.	.	.	.	.	.	.	.	.	.	1	2	3
		Died in Institution	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.
TOTALS (non-pulmonary)...			2	3	11	.	2	3	2	1	1	.	.	2	4	6	17	27

TABLE VI.

Return showing the Numbers of Persons successfully vaccinated and re-vaccinated at the cost of the rates by the Medical Officers of the Institutions and the Public Vaccinators during the Year ended 30th September, 1934.

Name of the Institution or Vaccination District.	Name of the Medical Officer or Public Vaccinator.	Numbers of successful Primary Vaccinations of persons :—			Number of Successful Re-vaccinations, *i.e.*, successful vaccinations of persons who had been successfully vaccinated at some previous time
		Under one year of age.	One year and upwards.	TOTAL	
Preston District No. 1 ...	Dr. D. J. Davies	223	16	239	17
,, ,, No. 2 ...	Dr. T. Pimley	74	2	76	...
,, ,, No. 2A ...	Dr. M. W. Talbot	132	4	136	1
	Totals	429	22	451	18

TABLE Vм.

Vaccination of Children whose Births were registered from 1st January to 31st December, 1933, inclusive.

Registration Sub-Districts comprised in the Vaccination Officer's District.	Number of Births.	Successfully Vaccinated.	Insusceptible of Vaccination.	Had Small Pox.	Number in respect of whom Statutory Declarations of Conscientious Objection have been received.	Died Unvaccinated.	Postponement by Medical Certificate.	Removal to Districts the Vaccination Officers of which have been duly apprised.	Removal to places unknown, or which cannot be reached; and Cases not having been found.	Number of these Births remaining on 31st January, 1935.	Total number of Certificates and copies of Certificates of Successful Primary Vaccination of Children under 14 received during the Calendar Year 1934.	Number of Statutory Declarations of Conscientious Objection actually received by the Vaccination Officer irrespective of the dates of birth of the children to which they relate, during the Calendar Year 1934.
East Preston ...	1171	380	6	...	496	87	44	16	48	94	...	...
West Preston ...	514	185	3	...	212	33	32	5	21	23	...	...
TOTAL ...	1685	565	9	...	708	120	76	21	69	117	602	700

VENEREAL DISEASES.

TABLE Vn.

RETURN relating to all persons who were treated at the Treatment Centre at Preston Royal Infirmary during the Year ending 31st December, 1934.

	Syphilis		Soft Chancre		Gonorrhœa		Conditions other than venereal		Totals		
	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	Totals
1. Number of cases on 1st January under treatment or observation	163	135	...	...	202	127	...	...	365	262	627
2. Number of cases removed from the register during any previous year which returned during the year under report for treatment or observation of the same infection	...	...	...	...	3	...	—	—	3	...	3
3. Number of cases dealt with for the first time during the year under report (exclusive of cases under Item 4) suffering from :—											
Syphilis, primary	22	1	—	—	—	—	—	—	22	1	23
,, secondary	9	6	—	—	—	—	—	—	9	6	15
,, latent in 1st year of infection	...	...	—	—	—	—	—	—	...	...	...
,, all later stages	63	35	—	—	—	—	—	—	63	35	98
,, congenital	7	7	—	—	—	—	—	—	7	7	14
Soft Chancre	—	—	...	...	—	—	—	—	...	...	...
Gonorrhœa, 1st year of infection	—	—	—	—	251	74	—	—	251	74	325
,, later	—	—	—	—	12	1	—	—	12	1	13
Conditions other than venereal	—	—	—	—	—	—	79	36	79	36	115
4. Number of cases dealt with for the first time during the year under report known to have received treatment at other Centres for the same infection	8	9	...	...	13	7	...	...	21	16	37
Totals of Items 1, 2, 3 and 4	272	193	...	...	481	209	79	36	832	438	1270
5. Number of cases discharged after completion of treatment and final tests of cure	32	23	...	...	150	79	79	36	261	138	399
6. Number of cases which ceased to attend before completion of treatment and were, on first attendance suffering from :—											
Syphilis, primary	8	1	—	—	—	—	—	—	8	1	9
,, secondary	8	5	—	—	—	—	—	—	8	5	13
,, latent in 1st year of infection	...	...	—	—	—	—	—	—	...	...	...
,, all later stages	20	36	—	—	—	—	—	—	20	36	56
,, congenital	5	8	—	—	—	—	—	—	5	8	13
Soft Chancre	—	—	...	...	—	—	—	—	...	...	...
Gonorrhœa, 1st year of infection	—	—	—	—	62	36	—	—	62	36	98
,, later	—	—	—	—	...	...	—	—	...	...	...
7. Number of cases which ceased to attend after completion of treatment but before final tests of cure	...	...	...	...	...	...	—	—	...	...	...
8. Number of cases transferred to other centres or to institutions, or to care of private practitioners	32	18	...	...	54	39	—	—	86	57	143
9. Number of cases remaining under treatment or observation on 31st December	167	102	...	...	215	55	—	—	382	157	539
Totals of Items 5, 6, 7, 8 and 9 (These totals should agree with those of Items 1, 2, 3 and 4)	272	193	...	...	481	209	79	36	832	438	1270
10. Number of cases in the following stages of syphilis included in Item 6 which failed to complete one course of treatment :—											
Syphilis, primary	...	...	—	—	—	—	—	—	...	...	...
,, secondary	...	2	—	—	—	—	—	—	...	2	2
,, latent in 1st year of infection	...	...	—	—	—	—	—	—	...	...	...
,, all later stages	4	...	—	—	—	—	—	—	4	...	4
,, congenital	...	...	—	—	—	—	—	—	...	...	...
11. Number of attendances :—											
(*a*) for individual attention of the medical officers	3414	2074	...	...	3238	2501	184	92	6836	4667	11503
(*b*) for intermediate treatment, e.g., irrigation, dressing	...	...	...	...	12762	2724	...	...	12762	2724	15486
Total Attendances	3414	2074	....	...	16000	5225	184	92	19598	7391	26989
12. In-patients :—											
(*a*) Total number of persons admitted for treatment during the year	1	...	...	...	1	2	...	...	2	2	4
(*b*) Aggregate number of "in-patient days" of treatment given	31	...	...	...	79	102	...	...	110	102	212

	Under 1 year		1 and under 5 years		5 and under 15 years		15 years and over		Totals	
	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.
13. Number of cases of congenital syphilis in Item 3 above classified according to age periods	1	...	...	...	2	3	4	4	7	7

VI.—Maternity and Child Welfare.

A.—STATISTICS.

1. Birth Rate.

The number of children born was 1,670, and the birth rate was 14.24 per 1,000 living, compared with 1,720 and 14.60 in 1933. Of the 1,670 births, 872 were males and 798 females; 1,587 were legitimate and 83 illegitimate. The percentage of illegitimate births was 4.97.

A summary of the 1,604 notifications received under the Notification of Births Act reveals the fact that 64.8 per cent. notifications were made by midwives, 15.3 per cent. by the Royal Infirmary, 12.8 per cent. by the Sharoe Green Hospital, 1.9 per cent. by doctors and parents, and 5.2 per cent. by private nursing homes.

2. Infant Mortality Rate.

The number of infant deaths was 115; of these 66 were males and 49 females. Deaths among legitimate children numbered 106 and illegitimate children 9. The death rate per 1,000 was 69.

The birth rate, infant mortality rate, the causes of and age periods at death, are shewn in the appendix to this section, and to Section I.

B.—GENERAL.

1. Maternal Deaths.

Twenty Preston women died as the result of pregnancy or childbirth during 1934. The place of death and the number of deaths which took place there is shown in the table below.

Maternal deaths, 1st January to 31st December, 1934 :

Place of Death	Total Deaths in the Borough	Internal Transfers	External Transfers	Nett
Preston Royal Infirmary ...	15	...	5	10
Sharoe Green Hospital ...	...	6	...	6
Private Houses	2	...	...	2
Nursing Homes	...	1	...	1
Isolation Hospital	1	...	...	1
	18	7	5	20

The majority of deaths occurred in hospital. In fairness to the hospitals, however, it must be stated that four out of the six cases dying at Sharoe Green Hospital, 12 out of the 15 cases dying at Preston Royal Infirmary, and the case dying at the Infectious Diseases Hospital were admitted to the respective hospitals as emergencies before, during or after delivery.

The cause of the death of the 20 Preston women, 10 of whom were primiparæ (first births) and 10 multi paræ (subsequent births), is shewn in the table below :

1. Deaths directly due to childbearing—	
Puerperal sepsis	6
Toxæmia (excluding chronic nephritis)	5
Embolism	3
Operative shock	2
Abortion	1
Extra uterine gestation	1
2. Deaths due to intercurrent disease associated with pregnancy or childbirth—	
Chronic renal disease	2
Total	20

Of the six cases who died from puerperal sepsis, five shewed obstetrical complications, including two forceps deliveries, one breech with extended legs, one retained placenta, and one cæsarean section following an unsuccessful tube induction. The other case had a normal delivery, but was in poor health, suffering from a cold at the commencement of labour.

The five cases of toxæmia include two cases of hyperemesis gravidarum (vomiting of pregnancy), two cases of albuminuria (one causing ante-partum hæmorrhage), and one case of delayed chloroform poisoning.

Of the three cases dying from embolism (clotting of blood in main veins) one followed an instrumental delivery at home, the patient dying only five hours later. One was the result of a femoral thrombosis (clotting of blood in veins of leg) following a cæsarean section, and the other followed a phlebitis (inflammation of veins) commencing thirteen days after delivery.

Both patients who died from operative shock, one a primipara and one with a history of a three months' miscarriage in 1933, were advised by their own private practitioners to attend Preston Royal Infirmary and be confined there, but both refused. At full term, however, they were admitted as emergencies, where death took place—in the one case following a cæsarean section and in the other, who was admitted in labour, following a difficult instrumental delivery. These two deaths might have been prevented had the patients taken their doctors' advice.

The woman dying from abortion was admitted to Sharoe Green Hospital as an emergency with a history of persistent hæmorrhage for twenty-four hours without medical attention, the patient refusing to have a doctor.

The woman, who died from a ruptured ectopic gestatien was admitted to Preston Royal Infirmary as an emergency. An operation was performed immediately in an attempt to save the patient's life but death took place within three hours of admission to hospital.

The two cases suffering from chronic nephritis (kidney disease) were both admitted to hospital, one to Sharoe Green Hospital and one to Preston Royal Infirmary, as emergencies suffering from ante-partum (before birth) hæmorrhage. They had both attended their respective ante-natal clinics—the one attending Sharoe Green Hospital having shown no previous sign of kidney disease, the other having been admitted to the Preston Royal Infirmary for treatment for the condition and then allowed to go home.

Eight of the 20 women had received no or inadequate ante-natal care, the other 11 having been under the care of private practitioners or midwives, or having attended the Corporation or hospital ante-natal clinics.

A report on the subject of maternal mortality in the Borough of Preston, with an analysis of 38 maternal deaths occurring during the period January, 1931—September, 1934 (inclusive), and recommendations arising therefrom, has been made by the Medical Officer of Health.

The maternal death rate for the year under review is 11.97 per 1,000 registered live births, or 11.27, including stillbirths.

2. Puerperal Fever.

There were four cases of puerperal fever notified during the year. Three cases were delivered at home and sent to Sharoe Green Hospital, the other occurring at Preston Royal Infirmary. Two of the cases, following difficult confinements at home, died at Sharoe Green Hospital; the other, where no cause for the fever was ascertained, recovered. The case at Preston Royal Infirmary died. There was no cause for the fever discovered.

*Puerperal Pyrexia.

Thirty-two cases of puerperal pyrexia were notified during 1934, 26 of these occurring at Preston Royal Infirmary, five in the patients' own home and one in a nursing home. The case occurring in the nursing home and four of the cases occurring at home were removed to Sharoe Green Hospital, the fifth case, due to influenza, remaining at home. An analysis of the possible cause of the pyrexia is shown in the following table :

Cause.	Number of cases.
Abnormal labour	18
Perineal tear	4
Mammary abscess	1
Pulmonary tuberculosis	1
Influenza	1
Cause unknown	7
Total ...	32

---

* The expression " Puerperal Pyrexia " means any febrile condition (other than a condition which is required to be notified as Puerperal Fever under the Infectious Diseases (Notification) Acts) occurring in a woman within 21 days after childbirth or miscarriage in which a temperature of 100.4° Farenheit (38° Centigrade) or more has been sustained during a period of 24 hours or has recurred during that period.

Of the 32 cases notified, three women died—two following an abnormal labour, the other following a normal labour, but suffering from an acute cold at the commencement of labour. These deaths occurred at Preston Royal Infirmary, and are included in the maternal deaths for the year. The rest of the cases recovered.

3. Ophthalmia Neonatorum.

Eight cases of ophthalmia neonatorum were notified during the year. Five of the babies suffering from this condition were born at home, two at Sharoe Green Hospital and one at Preston Royal Infirmary. Three of the cases confined at home were delivered by midwives and two by a doctor and midwife. Three cases were treated at home by private practitioners, three cases received treatment at Preston Royal Infirmary, and two cases were admitted to the Isolation Hospital for treatment. There was impairment of vision in one case only—a child born at home with doctor and midwife in attendance, and subsequently admitted to Preston Royal Infirmary for treatment.

4. Stillbirths.

During the year there were 109 stillbirths registered; 60 of these were notified. Fifty-eight were investigated either by the health visitors, or where necessary by the Maternity and Child Welfare Officer. The causes of the stillbirths were found to be as follows :

Difficult labour	15	Hydramnios	2
Prematurity	11	Foetal deformities	2
Accidents to mother	7	Placenta Prævia	1
Toxæmias of pregnancy	5	Cause unknown	3
Accidental hæmorrhage	6		
Intercurrent disease of mother during pregnancy	6		

How many of these stillbirths were avoidable is a matter for conjecture. Difficulties during delivery accounts for the highest percentage. Investigation shows that one-third of these cases presenting difficulties had no antenatal care. Premature birth, accounting for 11 of the stillbirths, shew, in the majority of cases, no cause for the prematurity. The intercurrent diseases during pregnancy, causing six stillbirths, include two cases of syphilis, and one each of heart disease, pneumonia, epilepsy and diabetes. The three cases, where no cause for the stillbirth could be found, had normal confinements at full term. One, delivered at Preston Royal Infirmary, had had no antenatal care, one had been a regular attender at a Corporation ante-natal clinic and the other was under the care of her own doctor.

5. Inspection of Midwives.

Forty midwives gave notice of intention of practice in 1934. Of these, 32 hold the certificate of the Central Midwives Board and eight were bona-fide—that is, in practice before the passing of the Midwives Act, 1902. The number of cases attended by them during 1934 was 1,024, 1,020 as midwives and four as maternity nurses.

Midwives are regularly inspected by the Maternity and Child Welfare Officer or Inspector of Midwives as regards their personal hygiene and cleanliness, equipment and keeping of registers and records of patients. This is usually done at the midwife's home without warning. In addition, midwives attend the North Road Clinic or the Municipal Building for the purpose of enquiry into special circumstances such as maternal deaths, stillbirths, or after contact with infectious disease. The midwives are encouraged to keep in close contact with the Maternity and Child Welfare Department, and to consult the medical officer in charge if they are in any difficulties concerning their work. On the whole, the inspections at home have been satisfactory. The midwives themselves observe the rules as to personal hygiene and their equipment is suitable. Ante-natal records, especially among the older midwives, are somewhat scanty and could be improved.

In six cases it was necessary to suspend the midwife from practice to carry out disinfection following contact with infectious disease. In two of these instances the midwife was compensated by the Council for loss of work at a cost of £1 0s. 0d.

Where a midwife, having been booked by a patient for confinement, loses her case owing to the patient, on medical advice, entering hospital for confinement, compensation may be paid to the midwife by the Council. During the year nine cases were sent to hospital by private practitioners and four cases by the medical officer in charge of a Corporation ante-natal clinic, the midwives receiving compensation at a cost to the Council of £8 2s. 0d.

In accordance with rule E.12 of the Central Midwives Board, medical aid must be sent for by the midwife in all cases of illness of the patient or child, or of any abnormality occurring during pregnancy, labour or lying-in. During 1934 medical aid was sent for in 143 cases, classified below according to Rule E.12.

RULE E. 12(b).

Death of mother	0
Pregnancy.	
Ante-partum hæmorrhage	12
Abortion	3
Dangerous varicose veins	1
Labour.	
Uterine inertia	22
Malpresentations ...	26
Placenta prævia	1
Retained placenta ...	3
Contracted pelvis ...	2
Ruptured perinaeum ...	24
Obstructed labour ...	13
Rigid cervix	2
Premature rupture of membranes	1

Lying-in.	
Post-partum hæmorrhage	3
Pyrexia	2
Bronchitis	2
The child.	
Prematurity	8
Dangerous feebleness ...	4
Ophthalmia neonatorum ...	6
Spina bifida	2
Pemphigus	1
Congenital heart	1
Deformity	1
Vaginal hæmorrhage ...	1
Convulsions	2

Of the 143 emergency calls for medical help by midwives, 99 applications were submitted to the Milk and Other Services Sub-Committee for financial assistance. The whole cost was granted in 69 instances, part cost in three instances, while the 27 remaining were refused. The cost to the Council was £154 9s. 9d. Two hundred and twelve applications for the services of a midwife were received. In 93 instances the whole cost was granted, and in 92 part cost granted, the remainder, 27, not being allowed. This service cost the Council £178 18s. 3d. Only five applications were received for the services of Home Helps. The whole cost was granted in four cases, and part cost in the other case, at a cost of £19 7s. 6d. In one case it was necessary to employ a Home Help for 38 days owing to the mother suffering from a white leg.

Post-graduate Course for Midwives.

In May, 1934, a week's post-graduate course was arranged for the midwives of Preston and district. The syllabus comprised visits to the Preston Royal Infirmary, where practical demonstrations were given in the ante-natal department, the women's venereal disease department and light department; visits to Sharoe Green Hospital, where a lecture was given by the Medical Superintendent on the subject of " Puerperal Sepsis," together with a practical demonstration on ante-natal cases; a visit to the Stoneygate Nursery School, where a lecture on " The Toddler and Rickets " was given by the Maternity and Child Welfare Officer; and a visit to Cuttle Street Health Centre, where a demonstration of ante-natal cases and a lecture on the subject of "Ophthalmia Neonatorum" was given by the medical officer in charge. A lecture was also given by Miss Ruth Nicholson, of Liverpool, on the subject of " Child Bearing and Gynæcological Diseases." This course was very well attended throughout and was greatly appreciated by the midwives.

6. Inspection of Maternity Homes.

There are nine Maternity Homes registered in Preston, comprising 32 beds for maternity cases, though some of these beds may be used for medical or surgical cases. The homes have been inspected during the year by the Assistant Medical Officer for Maternity and Child Welfare or the inspector of midwives, together or separately, as regards their accommodation, cleanliness, equipment, and records kept. Three of the homes have had no patients during the entire year. On the whole, the homes were satisfactory. One was found to be without a fire extinguisher. This was remedied before the next visit. There were no maternal deaths occurring in Preston nursing homes; the case referred to in the section on maternal deaths, though a Preston resident, occurred in a maternity home outside the borough.

There was one case of puerperal pyrexia notified as occurring in a maternity home. The patient was removed to Sharoe Green Hospital, and disinfection of the home and nurse in charge of the case carried out. The patient recovered and no further cases occurred in the home.

7. Infant Welfare Centres.

Routine work at the infant welfare centres has been carried out as usual. It is deplorable that so many babies are now artificially fed. In spite of the provision of free dinners, ovaltine, etc., to expectant and nursing mothers, many mothers are unable or unwilling to feed their infants. The test of a good infant welfare centre should be the number of babies who are breast-fed and thriving. Many mothers have already weaned their babies before their first appearance at the centre. It is a matter for conjecture if this would be the case if milk and dried milk were not provided by the Council. It is not, however, the baby in the early months of its life which calls for most attention, but rather the child over a year old. It is the child of this age which constitutes at least two-thirds of the medical consultations. Unless the mother is intelligent and understands the necessity for regularity in presenting the toddler, she becomes careless as regards suitable food, rest, fresh air and cleanliness, to the detriment of the child. When the child reaches the age of two years, the Nursery School is a powerful weapon to combat these conditions. Before this age, however, unless the mother is willing to take the advice proffered at the Infant Welfare Centres and to carry it out faithfully, the child suffers and his physical and mental condition deteriorates. A special clinic, set apart for toddlers, may overcome these difficulties to a certain extent, but, without extra staff, this is not feasible at present.

During the winter, cookery and dressmaking demonstrations have been held at the centres. These have been much appreciated and well attended, especially the dressmaking classes, where the mothers have learnt how to make children's garments from oddments and remnants.

Sale of Dried Milk, etc., at the Centres.

There was a fall in the value of goods sold at cost price, from £446 in 1933 to £398 in 1934. There was, however, a further marked increase in the amount of food, mainly cows' milk, supplied free to nursing and expectant mothers. The cost was £2,445, as compared with £2,062 last year.

8. Massage.

The massage department continues to do good work. The improvement made to the child by massage is very soon apparent to the mother, who, therefore, brings the child for treatment regularly. The children are referred by the medical officer in charge of the Infant Welfare Centres to the massage department, either direct or through the orthopædic clinic. Where the child is suffering from rickets, massage is given in conjunction with sunlight and administration of vitamins A and D in the form of cod liver oil.

The table below is an analysis of the work done :—

	North Road.	Cuttle Street.
No. on register, 31st December, 1933 ...	63	15
No. of new cases	88	25
No. discharged	93	27
No. on register, 31st December, 1934 ...	58	13
No of treatments given	1620	376
Maximum number of treatments ...	19	13
No. of sessions	194	44
Average treated per session	8	8

Twenty-one cases were referred to the orthopædic clinic before receiving massage. The total number discharged during 1934 as cured or improved was 120, treatment having been necessary for the following conditions :—

Genu valgum	14
Genu varum	18
Flat feet	14
Congenital talipes	3
Rickets	51
Weakness of muscles and debility	20
Total ...	120

9. Ante-natal Centres.

There are three ante-natal sessions held weekly—two at North Road Clinic and one at Cuttle Street Clinic. The number of new patients and the number of attendances made has increased considerably during 1934. Women failing to continue their attendance are followed up in their homes. Where the cause is ascertained to be ill-health, the patient is advised to call in her midwife or doctor, as the case may require. Most women appreciate the value of regular supervision, and seriously regard the advice given. Our difficulty is to reach the diffident, the unintelligent, the careless and the over-burdened. To include them within the ambit of the organisation is our constant care. Many women are sent to the centres by midwives of the town. In such cases the medical officer sends a written report of her findings to the midwife concerned.

The abnormalities detected at the ante-natal clinics during 1934 are shewn in the following table :—

Carious teeth	109	Ante-partum hæmorrhage ...	4
Albuminuria	44	Gonorrhœa	3
Anæmia	34	Stomatitis (septic mouth) ...	3
Varicose veins	33	Syphilis	1
Constipation	18	Pleurisy	1
Vaginal discharge ...	14	Inguinal hernia	1
Heartburn	10	Glycosuria	1
Bronchitis	12	Pruritus (skin disease) ...	1
Heart disease	13	Keratitis (eye disease) ...	1
High blood pressure, with with or without albuminuria	6	Bronchiectasis	1
		Phlebitis	1
		Malnourishment	1
Vomiting	6	Contracted pelvis	16
Hæmorrhoids	4	Breech presentation	16
Retracted nipples ...	4	Transverse presentation ...	1

The attendances of patients at the clinics are shewn in the following table:

	North Road.	Cuttle Street.
Number of new patients	412	147
Number of old patients	754	298
Number of attendances	1166	445

Eighteen per cent. of the women who attended were primiparæ. Usually, a first confinement presents more difficulties than subsequent ones. Efforts should be made, therefore, to induce the woman pregnant for the first time to seek medical advice. Such women may be recommended to the ante-natal clinic by their friends. They may be sent by their midwives or the Health Visitors if they hear of them. Often the latter may know nothing of the pregnancy until the birth of the child is notified. Until such time as the notification of pregnancy is made compulsory, the means of discovering primiparæ by Health Visitors must remain limited. Once in attendance at the Infant Welfare Centre, the mother can be asked to attend the Ante-natal Centre for subsequent pregnancies.

10. Artificial Sunlight.

A summary of the work done in this department is given below :—

No. on register, 31st December, 1933 ...	14
No. of new cases	58
No. discharged	56
No. on register, 31st December, 1934 ...	16
No. of treatments given	469
Maximum number of treatments	20
No. of sessions	74
Average treated per session	6

The work done in this department has been quite satisfactory. Many children have shewn marked improvement by their attendance. Children suffering from rickets and those convalescent from some serious illness, such as pneumonia, give the most satisfying results.

11. Dental Treatment.

The preliminary work is undertaken by two of the School Dental Surgeons, whilst the dentures are made by private practitioners, the patient now having a free choice of practitioner.

The attendances show very satisfactory figures for the year. Both nursing and expectant mothers show a greater willingness to accept dental treatment as the value of the work becomes better known.

The work done during the year is tabulated below :—

Sessions of treatment ...	62		
Nursing mothers attended ...	104		
Expectant mothers attended	68		
Children attended	68		
Total attendances	489	Average per session ...	7.89
Fillings	70	,, ,, ,, ...	1.11
Extractions	857	,, ,, ,, ...	13.82
Dressings	54	,, ,, ,, ...	0.87
Scalings	18	,, ,, ,, ...	0.29

Dentures were provided in 19 cases during the year, and a comparative table of the applications and costs for the past seven years is given below :—

Year	No. of Applications for Dentures	Not Granted	Granted Free	Part Cost Granted	Cost borne by Applicant			Council		
					£	s.	d.	£	s.	d.
1928	34	...	1	33	53	5	0	97	9	6
1929	26	...	...	26	28	5	0	70	14	3
1930	66	10	2	54	51	6	9	194	0	3
1931	58	...	...	58	33	15	11	111	16	7
1932	72	5	...	67	32	1	0	59	12	0
1933	56	11	1	44	53	12	0	76	1	10
1934	48	2	1	45	36	4	0	48	17	2

12. Infant Life Protection.

There were 30 boarded-out children in Preston during the year. Under satisfactory conditions, babies under one year are visited once monthly and thereafter every three months up to the age of nine years. During the year under review the health visitors, who are Infant Life Protection Officers, paid 128 visits to the 30 children. The remuneration received by the foster-parents varies from 5s. 0d. to £1 weekly.

13. Voluntary Workers.

During the year there were 60 voluntary workers attached to the ordinary clinics, as in the previous year. They performed routine clerical work, and made themselves responsible for the free dinners scheme, free holiday at Lytham, and the Christmas parties. The Medical Officer of Health again acknowledges his indebtedness for the untiring efforts of this willing band of workers.

The number of dinners given under the free dinners for expectant and nursing mothers scheme was 8,333 meals to 253 mothers, compared with 8,247 meals to 268 mothers last year.

14. Maternity Institutions.

During the year a maternity unit has been opened at the St. Joseph's Hospital, Mount Street, comprising 10 beds. There are 35 beds at Sharoe Green Hospital and 16 at the Preston Royal Infirmary, thus making a total of 61, solely for maternity cases. Details of the work done at Sharoe Green Hospital and Preston Royal Infirmary are given elsewhere in the report.

One hundred and thirty-one applications were received for a bed at Sharoe Green Hospital. In 52 of these the whole cost was granted, in 66 cases part cost was granted, and in 13 applications no assistance was given. Eight applications were received in respect of a bed in the maternity wards at the Preston Royal Infirmary. In two instances the whole cost was granted, and in six cases part cost was borne by the Council. The total cost of this service was £303 3s. 0d.

15. Work of the Health Visitors.

During the year the Health Visitors paid 962 visits to expectant mothers. They visited 1,561 new-born infants, and paid 5,673 re-visits to children under one year of age. They investigated and advised upon 2,557 cases of various diseased conditions, principal among which were measles and whooping cough. In addition to this, they were able to pay 9,367 visits to children of pre-school age. In all they paid 20,120 visits.

16. Baby Day.

Owing to the necessity for economy, there were no Baby Day celebrations held in 1934. It was felt that as work of an educational nature was already being given at the infant welfare centres, and that social events were kindly provided by the Preston Infant Welfare Voluntary Workers' Association, the cost of an additional Baby Day could be avoided with the least detriment to the ordinary work.

APPENDIX
TO
SECTION VI.

TABLE VIA.

Infant Deaths.

Year.	No. of Births.	Under 1 Week.			Under 1 Month.			Total.	
		No.	Rate per 1,000 Born.	Per-centage of total Infant Deaths.	No.	Rate per 1,000 Born.	Per-centage of total Infant Deaths.	No.	Rate per 1,000 Born.
1921	2811	79	28·1	25·0	127	45·2	40·2	316	112
1922	2482	68	27·8	28·1	100	40·3	41·3	242	97
1923	2426	59	24·2	24·7	100	41·2	42·0	238	98
1924	2328	63	27·6	28·0	98	42·1	43·1	225	97
1925	2174	66	30·3	23·1	94	43·2	32·8	286	131
1926	2160	62	28·7	31·8	90	41·6	46·1	195	90
1927	1892	53	28·0	25·7	88	46·5	42·7	206	109
1928	1916	51	26·6	29·1	80	41·7	41·7	175	91
1929	1967	59	30·0	28·8	89	45·2	43·9	205	104
1930	1975	60	30·4	41·4	85	43·0	58·6	145	73
1931	1881	47	24·9	28·4	70	37·2	42·4	165	88
1932	1764	51	28 9	34·2	63	35·7	42·3	149	84
1933	1720	48	27·9	32·0	71	41·2	47·3	150	87
1934	1670	45	26.9	39·1	60	35·9	52·2	115	69

TABLE VIb.

Infantile Mortality, 1934.

Nett Deaths from stated Causes at various Ages under One Year of age.

CAUSE OF DEATH.	Under 1 Week.	1 - 2 Weeks.	2 - 3 Weeks.	3 - 4 Weeks.	Total under 1 Month.	1 - 3 Months.	3 - 6 Months.	6 - 9 Months.	9 - 12 Months.	Total Deaths under One Year.	
All Causes:—											
Certified	43	7	5	4	59	18	15	10	12	114	
Uncertified	1	...	...	...	1	...	...	...	...	1	
										M	F
Small Pox	...	...	...	...	...	...	...	...	...	...	...
Chicken Pox	...	...	...	...	...	...	...	...	...	...	...
Measles	...	...	...	...	...	...	1	2	4	4	3
Scarlet Fever	...	...	...	...	...	...	...	...	...	...	...
Whooping Cough	...	...	...	...	...	...	...	...	1	...	1
Diphtheria and Croup	...	...	...	...	...	...	...	...	...	...	...
Erysipelas	...	...	...	...	...	...	...	...	...	...	...
Tuberculous Meningitis	...	...	...	...	...	...	...	...	...	...	...
Abdominal Tuberculosis	...	...	...	...	...	...	...	...	...	...	...
Other Tuberculous Diseases	...	...	...	...	...	...	...	...	1	...	1
Meningitis (not Tuberculous)	...	1	...	...	1	...	1	...	...	1	1
Convulsions	3	...	...	1	4	1	...	...	...	2	3
Laryngitis	...	...	...	...	...	...	...	1	...	...	1
Bronchitis	...	...	...	...	...	1	...	1	1	...	3
Pneumonia (all forms)	...	1	...	...	1	...	4	1	5	4	7
Diarrhœa	...	...	...	...	...	...	...	...	...	...	...
Enteritis	...	...	...	...	...	1	3	...	...	2	2
Gastritis	1	...	...	1	2	1	...	...	...	1	2
Syphilis	...	...	...	...	...	...	...	...	...	...	...
Rickets	...	...	...	...	...	...	...	...	...	...	...
Suffocation, overlying	...	...	...	...	..	2	...	...	...	1	1
Injury at Birth	...	...	...	...	...	...	...	...	...	...	...
Atelectasis	1	...	...	...	1	...	...	...	...	...	1
Congenital Malformations	9	4	1	1	15	3	2	1	...	14	7
Premature Birth	26	1	4	...	31	1	2	...	...	23	11
Atrophy, Debility and Marasmus	...	...	...	1	1	4	...	1	...	5	1
Other causes	4	...	...	...	4	4	2	3	...	9	4
Total	44	7	5	4	60	18	15	10	12	66	49

TABLE VIc.

Maternal Deaths. Incidence, Morbidity and Mortality.

5 Year Periods. Average.	No. of Nett Births	No. of Cases Notified.		Puerperal Fever.			Other Accidents and Diseases of Pregnancy.		Total Mortality from Child Birth.
		Puerperal Pyrexia	Puerperal Fever	No. of Deaths.	Incidence per 1000 Births.	Mortality per 1000 Births.	No. of Deaths	Mortality per 1000 Births.	
1916-1920	2262	...	6.8	4.0	2.47	1.65	6.0	2.43	4.08
1921-1925	2444	...	8.0	4.8	3.28	1.97	8.0	3.29	5.25
1926-1930	1982	21.0	6.6	5.4	14.02	2.69	7.2	3.63	6.32
1931	1881	36	10	5	19.14	2.66	5	2.66	5.32
1932	1764	28	4	4	18.14	2.27	6	3.40	5.67
1933	1720	16	11	4	15.69	2.33	3	1.74	4.07
1934	1670	31	4	6	20.96	3.59	14	8.38	11.97

TABLE VIc. (1).

Attendances at Ante Natal Centre.

	North Road.		Cuttle Street.		Total.	
Year.	New Cases.	Total Attendance	New Cases.	Total Attendance	New Cases.	Total Attendance
1929 ...	346	904	...	...	346	904
1930 ...	431	1155	...	...	431	1155
1931 ...	297	820	58	137	355	957
1932 ...	365	963	117	349	482	1312
1933 ...	342	910	131	413	473	1323
1934 ...	412	1166	147	445	559	1611

TABLE VId.

Allocation of Births, Infant and Maternal Deaths.

	Total No. of Births Registered	Nett Births	Nett Infant Deaths	Puerperal Fever and Pyrexia		Deaths from other diseases of Pregnancy and Parturition
				Cases	Deaths	
Private Houses	108	1066	67	7	...	2
Nursing Homes	68	43	...	1	..	...
Royal Infirmary	394	237	20	27	1	9
Isolation Hospital	1	1	2	...	1	...
Midwives Homes	50	38	...	...	...	..
Other Institutions (Inward Transfers)	...	285	26	...	4	3
Total	1593	1670	115	35	6	14

TABLE VIe.

Allocation of Attendances at Centres.

Situation of Centre	Total Infants (a)	New Infants included in (a) (b)	New Older Children included in (a)	Expectant Mothers	Total Attendances 1934	Total Attendances 1933
Cuttle Street	5488	219	65	287	5775	5619
Deepdale Mill Street	3956	78	33	355	4311	4822
Walker Street	4041	145	25	336	4377	4335
Fylde Road	3925	199	33	333	4258	4176
Edward Street	3561	129	29	329	3890	4245
Manchester Road	4086	131	19	143	4229	5000
North Road Centre	2052	128	24	...	2052	2161
Ante-Natal Clinic	...	...	...	1166	1166	910
,, ,, ,, Cuttle St.	...	...	...	445	445	413
Totals	27109	1029	218	3394	30503	31681

THE SCHOOL MEDICAL SERVICE

I.—PERSONNEL.

The Medical Service Sub-Committee of the Education Committee :

November, 1934.

Chairman : Mr. Alderman R. Durham.

The Chairman of the Education Committee (Alderman Mrs. Pimblett).

The Vice-Chairman of the Education Committee (Mr. Councillor Pye).

The Chairman of the Higher Education Sub-Committee (Mr. Councillor Goodier).

The Vice-Chairman of the Higher Education Sub-Committee (Mr. Councillor Jamieson).

The Chairman of the Elementary Education Sub-Committee (Mr. Councillor Pye).

The Vice-Chairman of the Elementary Education Sub-Committee (Rev. R. G. F. Wyatt).

Mr. Alderman Rainford.
Mrs. Councillor Rainford.
James Yates, Esq.
W. J. Heal, Esq.
Miss McCourty.
Mrs. Woodcock.

Officers.

Superintendent School Medical Officer : F. A. Sharpe, M.D., B.S., D.P.H.

Assistant School Medical Officers : M. E. Cliff, M.D., Ch.B., D.P.H. (resigned 18th July, 1934);
J. Maddison, M.D., B.S., D.P.H. (resigned 27th May, 1934);
Hugh Craig, L.R.C.S. & P., L.R.F.P.S. (appointed 28th May, 1934);
M. A. Glass, M.B., Ch.B., B.Sc., D.P.H. (appointed 1st October, 1934).

Dental Surgeons : J. Knowles, L.D.S., G. Williams, L.D.S.,
W. A. Lilley, B.D.S. (resigned 30th June, 1934);
S. W. Gee, L.D.S. (appointed 2nd July, 1934).

School Nurses : A. Butterfield, D. G. King, G. Whalley, M. E. Booth, E. B. Pilkington.

Clerical Staff :

T. Gray, D. H. Pendlebury, I. Pinder, G. Alker, V. Bateson (half time), I. Knowles (half time).

2.—CO-ORDINATION.

Relationship between the School Medical Department and other bodies having Public Health duties continues to function smoothly. This opportunity is afforded to thank the Director of Education for his continued activity on behalf of the service.

THE SCHOOL MEDICAL SERVICE IN RELATION TO PUBLIC ELEMENTARY SCHOOLS.

3.—SCHOOL HYGIENE.

The sanitary condition and general equipment of schools has been described in previous reports and progress is being made in the necessary repairs and alterations.

Two new schools were opened during the year—the Holme Slack Council Junior School on the 4th June, and Greenlands Council Junior School on the 29th October.

The Director of Education informs me that decorations were carried out at the following schools during the year :—

> St. Andrew's Girls' and Infants', St. Michael's, English Martyrs' Girls', Infants' and Central, St. James', St. Mary's C.E., St. Matthew's Branch, St. Saviour's Mixed and Infants', Sacred Heart R.C., St. Cuthbert's, Moor Park Methodist, Hincksman Memorial, St. Augustine's Girls' and Infants', Deepdale Modern, Deepdale Council, Trinity Council, Roebuck Street Council, and part only of Glover's Court, Frenchwood Junior, Park, and Grammar Schools.
>
> New floors were laid at St. Thomas' Infants', Glovers Court (Cookery Room), St. Andrew's Boys' and Infants', St. Joseph's Boys', and English Martyrs' Infants' Schools.

Table XII of the appendix indicates the number of schools in the borough, their accommodation and average attendance for the year ended 31st March, 1934.

4.—MEDICAL INSPECTION.

Medical inspection of school children in the statutory age groups was carried on throughout the year; 1,843 were inspected of the recently admitted children, 1,673 of the eight year old group, 1,803 of the twelve year old, a total of 5,319, compared with 5,422 last year. There was an increase in the number inspected in the first age group, but in the second there was a slight decrease and in the third a substantial decrease. The number inspected in the third age group last year was 2,018, so that the reduction here is 215; this is not a large difference, and probably can be accounted for by fluctuation of population.

Routine inspection was also carried out on 1,778 children who had attained the age of 14 years and were about to leave school; 3,987 special cases were examined at the clinics, and in connection with the latter 5,818 re-examinations were made. At the schools 58 special examinations and 1,712 re-inspections of routine age group children were carried out.

Details of these inspections are set out in tables I and XIII of the appendix. It will be noted that there is again an increase in the number of children attending the various Clinics; the figures for 1934, 1933 and 1932 show a gradual increase in the numbers of new cases at the Clinics, approximating to 300 per year.

5.—FINDINGS OF MEDICAL INSPECTION.

Complete lists of defects discovered during the course of the various inspections are given in the following tables:—

Medical Inspection at Schools by the School Medical Officers—Table II.
Medical Inspection at Clinics by the School Medical Officers—Table XIV.
Dental Inspection at Schools—Table XVIII.
Inspection by the School Nurses at Schools—Table XI.

The attendances at the Medical Inspection Clinics showed a decrease from last year; there were 331 more new cases, but 293 less actual attendances. The Minor Ailments Treatment Centres were attended by 495 more new cases, but there were 58 fewer actual attendances. The lower average attendance is a possible indication of the readier response to treatment of the cases, due to the willingness of the parents to co-operate in the treatment; a slightly higher standard of nutrition in the children, with their resultant more rapid healing; and the fact that complaints once diagnosed can be immediately referred to one of the numerous Special Clinics for appropriate treatment, and reviewed only at intervals.

The number of children excluded from school during the year has increased from 1,066 in 1933 to 1,297 in 1934, but the number of actual sessions of absence has decreased from 46,407 to 45,794. These figures give an average exclusion per new case of 8 sessions and an average exclusion of the total children attending elementary schools of 2.7 sessions. These compare with 13.5 and 2.7 in 1933.

(a) Malnutrition.

This year has been notable for the introduction of a scheme for supplying milk to all school children. The children fall into three categories—(i) able to pay, (ii) suffering from malnutrition and unable to pay, (iii) healthy children but unable to pay. Enquiries are made into the circumstances of each case in the poverty groups, and appropriate children admitted to the free list. The result of this has been that in November 18,412 bottles of milk were supplied free, and in December 16,950, a daily average of 837 in November and 1,211 in December. The total daily average of children having milk in the schools was 12,176 in November and 12,918 in December.

Although it is difficult at this early date to estimate the general benefit obtained from this measure, it is definitely showing in individual cases. Children who have been excluded from school for some reason, and who have reached the real convalescent stage before they have been re-admitted, have been found unable to gain weight until the actual return to school, and mothers attending the clinics have freely admitted that their children were missing the regular daily milk in the middle of the mornings.

The results of the Milk Scheme should be perceptible by the end of 1935 in actual figures of diminution of malnutrition cases, though, of course, the milk in itself would not be able completely to nourish an ill-fed child, but in combination with the schemes for supplying free cod liver oil and malt, and free dinners where necessary, it ought to make a big difference not only in the appearance, but in the educational capacities of these children.

During the year 484 children were supplied with free cod liver oil and malt, Virol or cod liver oil emulsion, and to these 2,885 cartons of cod liver oil and malt, 501 cartons of Virol, and 50 bottles of emulsion were distributed. In addition, 276 cartons of cod liver oil and malt, 78 cartons of Virol and 22 bottles of emulsion were sold at cost price.

A report on the feeding centres is contained in a subsequent paragraph.

Two hundred cases of malnutrition were brought to the notice of the School Medical Officers during the year—163 at the inspection clinics and 37 at routine school inspections. These children required special supervision.

(b) Uncleanliness.

The improvement in cleanliness as regards infection by pediculi capitis is steadily maintained, and this can be attributed without doubt to the constant careful supervision by the School Nurses of the children, in the schools and at the clinics.

84.3 per cent. of the children inspected were entirely free from infection, compared with 81.6 in 1933 and 79.1 in 1932. This decrease in the amount of infection is evidenced in the number of visits which were paid to the homes by the School Nurses; 1,561 such visits were made, as compared with 1,755 in 1933.

(c) Minor Ailments and Diseases of the Skin.

Tables XIV and XV in the appendix give an account of the defects under this heading referred to the School Medical Officers and treated by the Nurses during the year.

Severe cases attending the Minor Ailments Treatment Clinic are referred by the Nurses to the Medical Officer for diagnosis, instructions regarding treatment and decision as to fitness for school.

There were only four cases of scabies, compared with eight last year, but there was a big increase in the number of cases of impetigo—726, as compared with 454 in 1933. The great increase in these numbers occurred in the months of June to October. It is interesting to speculate whether the phenomenal drought of last summer was a contributory factor to this increase. Cases of ringworm show a considerable decrease.

(d) Visual Defects and External Eye Disease.

The importance of this branch of the School Medical Service requires emphasis. We are here concerned not only with the prevention of blindness, which is the subject of a special report now in course of preparation, but also with eye defects or disease which may indicate poor general health, and frequently are the cause of backwardness on the part of the child affected.

The defects of vision are dealt with at the Refraction Clinic, of which there are three sessions per week; 410 cases of external eye disease were treated in the Minor Ailments Clinics. Of the refraction appointments made, 93 per cent. were kept. The total attendance was 2,909, and of 698 children who obtained prescriptions for spectacles or modified lenses the Education Committee met the expense of 136 cases. Further details may be had by referring to Tables II and XVII.

(e) Nose and Throat Defects.

6.8% of the total children inspected in the schools suffered from enlarged tonsils and adenoids, and were referred for treatment, compared with 9% in 1933, and 7.3% were referred for further observation, compared with 3.3% last year.

Vouchers to attend Preston Royal Infirmary were given in 468 instances and 441 received operative treatment. Eight children were operated on by private practitioners, and 129 children received other forms of treatment either at the Royal Infirmary, by private practitioners, or at the Clinics.

Tables VII and XVI contain further details of the incidence and treatment of this defect.

Although the total number of children with defective tonsils is appreciably lower, it is surprising to find how many children have gross lesions of the tonsils; it is not uncommon to find children at the school inspections who have tonsils meeting in the middle line, and these children very often are so accustomed to having head colds that they do not realise they have them, and yet the parents apparently have found nothing wrong in this, and are surprised and rather pained to be informed that their particular child is not normally healthy. There seems to be an opening for adult instruction in the dangers of such conditions, although everything possible is done at the Clinics to instruct parents.

(f) Ear Diseases and Defective Hearing.

Minor defects of the ear show an increase, although not great. During the year the Medical Officers examined a total of 419 cases of ear defect, and there were 450 new cases treated at the Minor Ailments Treatment Centres. These figures show an increase of 21 in the first instance and of 54 in the second. Of the 419 cases examined by the Medical Officers, 45 suffered from defective hearing, 232 from otitis media (running ears), and 142 from various other diseases of the ear.

(g) Dental Defects.

This is the first complete year since the adoption of the policies of reduction of routine age groups and the denial of subsequent treatment for persistent refusals, and the report now presented fully justifies these measures.

In spite of some delay due to illness amongst the Staff and the fact that in many schools there still remained to be undertaken much outstanding conservation treatment, the lag has been almost entirely taken up in this first full year, and an almost complete round of inspection of elementary schools has been made. The School Dental Service, therefore, feels justified in undertaking the inspection and treatment of an additional age group during 1935, when conditions are likely to be more favourable.

The figures for routine inspection in elementary schools are back to normal, 6,301 children having been examined during 46 half-day sessions. 3,849 children were found to require treatment and 2,575 accepted treatment at the Clinics. This gives 67% acceptances, as compared with 59% last year. The School Nurses paid 1,953 visits to homes during the year for the purpose of explaining the nature of the treatment to be given and urging acceptance. They were successful in only 21% of the cases, and of the children thus concerned a great majority failed to keep appointments for treatment. In view of the amount of time and energy expended in making so many fruitless visits, the dental surgeons are of the opinion that this work might be drastically curtailed and the Nurses released for other more beneficial employment of their time.

Tables XXI and XXII in the appendix show an all-round increase over last year's figures in attendances and treatment received by children in routine age groups and a considerable reduction in corresponding figures for casuals. These very desirable changes in proportions are due to the continued policy of undertaking more comprehensive treatment in routine cases, and it is to be expected that as the routine age groups are extended, the numbers of casuals attending the Clinics, and consequently the amount of treatment required by them, will gradually fall.

5,583 children from elementary schools made 10,160 attendances for treatment at the Clinics; 6,604 fillings were completed, 9,414 extractions performed, and nitrous-oxide gas and other anæsthetics were administered in 1,692 cases. Other operations included 1,387 dressings and preparatory treatment, and 16 scalings.

There is a gratifying general improvement in the condition of the children's teeth, the proportion requiring treatment being reduced by an average of 7%; but dental hygiene as practised at home still leaves much to be desired in very many cases. Tooth brushes are still available to all children at schools and clinics at a cost of 3d. each.

Detailed figures concerning elementary schools are given in tables IX and XVIII to XXII in the appendix.

Secondary schools are again dealt with in Section 14 and in table XXVII of the appendix.

(h) Orthopædic and Postural Defects.

Seventy-four cases of deformities were examined by the Medical Officers and recommended for treatment.

The number of children up to the age of 16 years known to the School Medical Service to be suffering from some degree of deformity sufficient to interfere with a normal mode of life is 63, compared with 52 last year; 40 attend public elementary schools, three the day Open-air School, five are in hospital, and 15 are either unable to attend school or are over school age. The majority of the latter are employed.

Children found to have some bone defect are generally referred to the Orthopædic Clinic for special advice and treatment, and attend there at regular intervals until the maximum benefit has been obtained; 45 new cases, compared with 86 last year, were thus referred; 145 school children actually received treatment during the year. The list of defects for which they were treated is as follows:—

Paralysis	36
Congenital Deformities	22
Other Deformities	54
Rickets	5
Inflammations	9
Tuberculosis	14
Nervous Diseases	1
Tumour	1
Unclassified	3
Total	145

The following is a summary of the work carried out during the period at the Orthopædic Clinic :—

	Education Committee.
New Cases	45
Cases treated during the year	145
Attendances	1264
Treated in the Liverpool Children's Country Hospital, Heswall, Cheshire (Residential Hospital School)	12
Treated in the Liverpool Children's Hospital, Myrtle Street, Liverpool	7*
X-rayed at the Royal Infirmary, Preston	21

* Treatment by Manipulation and Plaster, 1; Operation, 6.

One hundred and thirteen surgical appliances, boots, irons, etc., were supplied and fitted, 112 children were given remedial exercises, and 12 plasters were made at the Clinic.

The average length of stay of discharged cases from the Liverpool Children's Hospital, Heswall, was 135 days, and of those cases treated as in-patients discharged from the Liverpool Children's Hospital, Myrtle Street, Liverpool, 23.3 days.

(i) Heart Disease and Rheumatism.

The increasing incidence of heart disease and rheumatism has been causing grave concern in the country generally. There is no doubt that rheumatic pains in children and adults alike are often endured, and in the case of children ignored, without having treatment of any kind. Parents still have an idea that a growing child gets " growing pains." This erroneous idea may result in disease of the heart for the child.

Heart disease in childhood is either congenital—that is, the child is born with a faulty heart—or acquired after some infective disorder, such as scarlet fever, diphtheria, rheumatism or influenza. Children with persistent tonsillitis may finish up with damaged hearts.

Congenital disease is occasionally discovered for the first time at the first school inspection, and if such a condition is found, the child is kept under the most strict supervision. Usually these cases find their way to the Open-air School.

Acquired heart disease found at the routine inspections, if acute, is referred to a private practitioner, and the child is excluded from school; but most commonly a more chronic condition is found. In this case the child is put down for re-inspection, and instructions are given about the amount of rest necessary and the type of diet most suitable. At the same time, the influence of homework, games and physical training on the heart is considered and suitable instructions given.

Children excluded from school at the Clinics by reason of chorea, rheumatism, scarlet fever, or other infective disease, are examined before re-admission for cardiac disease.

Anæmic or under-nourished children are frequently found to have some heart disturbance, but this is of a functional nature and responds readily to treatment by tonics, fresh air, and suitable food. These children do amazingly well at the Open-air School.

During the year 40 cases of functional disease of the heart were discovered by the School Medical Officers at school medical inspection, and referred to their own doctors for treatment; 53 other children similarly affected were referred for further observation; 16 other cases were found at the school Clinics. Thirty-seven cases of organic disease were found at school medical inspections and referred for treatment, and three cases were referred to the school Clinics. There are in all 17 children who suffer from heart disease which " is so severe as to necessitate the provision of educational facilities other than those of the public elementary school "; nine of these attend the day Open-air School and eight are excluded from school indefinitely.

(j) Tuberculosis.

Twenty cases discovered at school medical inspection and the inspection Clinics were reported to the Tuberculosis Officer for his opinion. Results were as follows :—Five pulmonary tuberculosis, one tubercular glands, two tubercular hips, three bronchitis, and nine no evidence of tuberculosis.

Positive cases are transferred to the Tuberculosis Department for following up and treatment.

6.—FOLLOWING UP.

A detailed summary of the number of home visits paid by the School Nurses in respect of specific defects forms table XXV of the appendix. The total, 5,801, is slightly larger than last year. Fifty-four more visits were paid; 1,953 of these visits were in connection with dental defects. Twenty-seven cases were referred to the Officer of the N.S.P.C.C. for his further action. The cases referred were nine enlarged tonsils and adenoids and 18 defective vision.

7.—ARRANGEMENTS FOR TREATMENT.

The detailed arrangements were reported on fully in the 1933 report. Sufficient to say that on ascertainment of defect, immediate steps are taken to notify the parents and to put the case in touch with the appropriate remedial agency. These agencies are the School Medical Officers, School Nurses, private practitioners, various departments of the Preston Royal Infirmary, in-patient and out-patient, and in some instances hospitals in Manchester and Liverpool. With the exception of conservative dental treatment, it could be said that appropriate treatment is provided. Results of treatment are incorporated with the finding of medical inspection in section 5.

Artificial Sunlight.

Table XXIII refers to the school children who attend this Clinic. It is no substitute for fresh air and natural sunlight, but during the wet months of the year it undoubtedly plays a part towards the maintaining of growth and general well-being of the school child. Its popularity is attested by the difficulty of avoiding a waiting list, but the more general disturbances in health seem to give the best results. This is taken into account in assessing the more urgent types of cases requiring treatment, such as general debility, malnutrition and rickets. At present the cases selected for this form of treatment attend twice a week. The possibility of three sessions per week for suitable cases is under consideration.

8.—INFECTIOUS DISEASE.

The year 1934 was marked by a wave of epidemic disease following a year which showed a remarkably low incidence of infections. Zymotic diseases come in waves, despite the constant precautions which are taken to prevent contacts between infected and uninfected cases, and this year there was an increase in measles and mumps, though a big decrease in scarlet fever and whooping cough. The last two months of the year were marked by an outbreak of diphtheria which, although never reaching the scale it attained in other parts of the country, required a great deal of investigation and care in the schools. Occasionally it was possible to track down unsuspected carriers who were promptly isolated, and without doubt the seriousness of the outbreak was minimised thereby. Twenty-one cases of diphtheria were notified from the schools, compared with two in 1933.

Certificates under Schedule 4, Rule 23 of the Code of Education certifying that the average attendance had fallen below 60 per cent on account of epidemic disease were issued in respect of the following :—

Hincksman Infants'—
    Week ended Jan. 12th—Measles.

St. Augustine's Infants'—
    Week ended Jan. 26th—Measles.
    ,, Feb. 2nd—Measles.
    ,, ,, 9th—Measles.
    ,, ,, 16th—Measles.

St. Paul's Infants'—
    Week ended Jan. 26th—Measles.
    ,, Feb. 2nd—Measles.
    ,, ,, 9th—Measles.
    ,, Nov. 16th—Mumps and Influenza.
    ,, ,, 23rd—Mumps and Influenza.

St. Mary's Street Methodist Infants'—
    Week ended Jan. 26th—Measles.
    ,, Feb. 2nd—Measles.

St. Cuthbert's Infants'—
    Week ended Feb. 9th—Measles.
    ,, ,, 16th—Measles.
    ,, ,, 23rd—Measles.
    ,, Mar. 2nd—Measles.
St. Ignatius' Infants'—
    Week ended Feb. 9th—Measles.
    ,, ,, 16th—Measles.
Ashton Methodist Infants'—
    Week ended Feb. 16th—Measles.
    ,, ,, 23rd—Chicken Pox.
    ,, Mar. 2nd—Chicken Pox.
St. Andrew's Infants'—
    Week ended Feb. 16th—Measles.
    ,, ,, 23rd—Measles.
    ,, Mar. 2nd—Measles.
Sacred Heart Infants'—
    Week ended Feb. 23rd—Chicken Pox.
    ,, Mar. 2nd—Chicken Pox.
St. Stephen's Infants'—
    Week ended Feb. 16th—Measles.
    ,, ,, 23rd—Measles and Scarlet Fever.
    ,, Oct. 12th—Mumps.
    ,, ,, 19th—Mumps.
    ,, ,, 26th—Mumps.
Moor Park Methodist Infants'—
    Week ended Mar. 2nd—Measles.
    ,, ,, 10th—Measles and Chicken Pox.
    ,, ,, 16th—Measles and Chicken Pox.
    ,, ,, 23rd—Measles and Chicken Pox.
St. Mary's R.C. Infants'—
    Week ended Dec. 7th—Mumps.

These compare with 14 certificates representing seven schools in 1933, and 32 certificates to 11 schools in 1932. Table XXIV of the appendix indicates the total number of cases of infectious disease reported by head teachers during the year.

9.—OPEN AIR EDUCATION.

The Open Air School has again remained full throughout the year; 48 boys and 34 girls have been admitted to the School, 50% (41 children in all) showing anæmia, debility and malnutrition. A detailed analysis of reasons for admission to the School is given in table XXVI.

On admission to the School the child rapidly responds to its new health-giving environment, for at the Open Air School the child is provided with adequate and suitable food; it lives, as far as practicable, in the open air; personal cleanliness and hygiene is insisted on; the child has an enforced daily rest period; and the School curriculum is altered to suit the child's needs.

At the Open Air School Clinics during the year there were 82 children examined on admission, 104 special examinations, 371 re-examinations and 530 examinations of children who were receiving artificial sunlight treatment.

Particulars of the Inspection Clinic and Minor Ailments Treatment Centre are included in table XIV and XV of the appendix. In addition to the Open Air School children, children from three nearby elementary schools attend this centre.

Records of the weights of all the children in the two schools are kept; the physically defectives are weighed each fortnight and the mental defectives three times a year. The total number of weights taken was 2,592 in respect of physical defectives and 83 in respect of mental defectives. The children are also measured, and during the year 473 measures were taken. Twenty-eight blood tests were made.

The children in both departments are bathed weekly, and a total of 5,862 baths were given.

Forty-six children recommended to receive cod liver oil and malt were given daily doses by the Nurse in the Clinic.

Particulars of the Orthopædic Clinic, the Ultra Violet Ray Treatment Clinic, and re-examinations of mental defective children, also carried out at this school, appear in other sections of the report.

During 1934 an attempt was made to gain some knowledge regarding the permanency of the good results obtained at the Open Air School, and with this end in view an investigation was made into the subsequent histories of 100 children discharged from the Open Air School during 1926 and 1927. There was no selection of cases, beyond the fact that all were considered fit and no longer suitable for retention at the School on the grounds of ill-health. These children entered the School at different ages, remaining there for a period varying from six months to six years three months, the average length of stay for all ages being one year nine months. Twenty-nine of the children were discharged at the age of 14 and considered fit for work, the remaining 71 being discharged to their former schools.

The present state of health of these children, now young adults, discharged from the School seven to eight years ago, is shown in the following table.

Present state of health of children discharged from the Open Air School in 1926 and 1927 as " fit " :—

State of Health.	Males.	Females.	Total.
Satisfactory	42	39	81
Fair	5	11	16
Dead	1	1	2
Very ill (pulmonary tuberculosis) ...	1	—	1
Total	49	51	100

It will be agreed that it is extremely gratifying to find such a large percentage of these once delicate children now enjoying good health.

The occupational state of these young adults is shown below :—

Occupation.	Males.	Females.	Total.
Cotton factory	14	19	33
Other factories	7	9	16
Shop assistant	6	4	10
Married	—	9	9
Skilled trades	8	—	8
Unskilled trades	2	2	4
Domestic service	—	3	3
Poultry farming	2	—	2
Army	1	—	—
Higher education	2	1	3
Unemployed	6	3	9
Dead	1	1	2
Total	49	51	100

It will be seen that 90% of children discharged from the Open Air School during 1926 and 1927 are now in actual employment. This is particularly noteworthy in these days of unemployment, and proves that the Open Air School child is capable of facing competition from products of ordinary schools.

10.—PHYSICAL TRAINING.

Physical training in the elementary schools is carried out under the direction of the teachers, no instructor being appointed for this work. Physical training classes form part of the school curriculum, and each of the schools has a copy of the " Syllabus of Physical Training for Schools " published by the Board of Education, and this is very generally used as a guide. In addition, games in season are organised and superintended by the teachers in the parks and playing fields. There are three parks and two playing fields in which organised football, cricket, basket ball, etc., may be played, and six smaller recreation grounds or enclosures for the use of the children.

Remedial exercises for postural defects are conducted weekly at the Orthopædic Clinic for children referred for this purpose by the Orthopædic Surgeon.

The equipment of secondary schools includes gymnasiums. Physical training is under the direction of qualified masters and mistresses. Each school has its own playing field.

The figures for children attending tne swimming baths remain high. At the four baths available—Saul Street, Moor Park, Haslam Park and Ribbleton Park—the total attendances were 23,445, 12,557 boys and 10,888 girls, compared with 26,096 in 1933. At Saul Street Baths two instructors teach the children to swim, and 959, compared with 1,028 last year, learned to swim at least one width during the season.

11.—PROVISION OF MEALS.

At the two centres, Marsh Lane and Glover's Court, 502 necessitous children were supplied with free meals, compared with 527 last year, and

68,744 meals supplied, compared with 74,761 last year. Children are recommended by the Head Teachers, School Medical Officers and School Attendance Officers, and arrangements are under the supervision of the School Attendance Officers.

The provision of milk to school children is dealt with in paragraph 5a

12.—BLIND, DEAF, DEFECTIVE AND EPILEPTIC CHILDREN.

Mental Defectives.

Children considered by Head Teachers to be educationally retarded by two or more years are systematically brought forward for special medical examination.

During the year 40 children were examined, the findings and recommendations being as follows :—

Normal or dull and backward	11	— Ordinary public elementary school	11
Feeble-minded	22	— Special school for mental defectives	20
,, ,, ...	—	— Residential special school for mental defectives	2
Low grade feeble-minded ...	2	— Notified to Local Authority under Mental Deficiency Acts (Mental Deficiency Acts Committee, Lancashire County Council)	7
Imbeciles	5		
	40		40

Three children about to leave a special school and in need of further institutional care or guardianship were notified to the Local Authority as requiring further institutional care or guardianship.

The education of mentally defective (feeble-minded) children is carried out at the Special School, Moor Park. The number of children admitted during 1934 was 23, 29 children left the school, and 85, consisting of 45 boys and 40 girls, remained on the register at the end of the year, compared with 91 at the end of 1933. Of the children leaving, 20 were 14 years of age, one was 15 years of age, four were discharged as ineducable and notified to the Local Authority under the Acts, two were admitted to residential institutions, and one was excluded from school on medical grounds.

Thirty-eight re-examinations of children attending the school were carried out at the Open Air School Clinic.

The educational programme for the mentally defective pays special attention to handicraft and gardening, carpentry, raffia work, basket making, sewing and clay modelling. Each child gets individual attention, and its mental development rather than its actual age in years is considered.

There are, in addition, two boys at Pontville residential school for the mentally defective and two girls in Allerton Priory.

Blind Children.

One child attending elementary schools in the Borough was certified blind within the meaning of the Education Act during the past year. There are now 15 children in the above category who are being looked after by the Preston Education Committee. Of these, one is in the Liverpool Homes for the Blind and the other 14 are at the Preston Homes for the Blind. Six are totally blind; the remaining nine are partially blind.

In the latter connection a Report by the Board of Education on the problem of partially-sighted children has been issued, and the School Medical Officers have been studying the needs of the Borough in terms of the recommendations.

Deaf Children.

During the past year several cases of defective hearing have been referred for the opinion of the School Medical Officers by both parents and teachers. Of these, two children have been recommended for admission to the Special School for the Deaf. The present position is that there are three boys and five girls at the Royal Cross School for the Deaf and one boy at the Boston Spa Home for the Deaf.

Epileptic Children.

See report on work of Open Air School.

Physically Defective Children.

These children are brought to the notice of the School Medical Officers at routine medical inspection or Inspection Clinics, and a report on Form 40aD is made and Certificate 38D completed. The names are entered on the waiting list for the Open Air School for Physically Defective Children, and they are admitted in their turn.

A report on the work of the Open Air School is contained in paragraph 9.

13—NURSERY SCHOOL.

The Nursery School is a great boon to the child aged 2-5 years. It is often just at this age that the child is somewhat neglected at home. Another baby has been born and the mother's attention is occupied with the new baby sometimes to the detriment of the older child, who quickly loses ground and develops bad habits. Such a child is frequently seen at the Infant Welfare Centre, and it is for this child that the Nursery School does so much. Here the child rapidly responds to an open-air environment, a good wholesome dietary, an enforced rest period, cleanliness, with training in hygienic habits, and suitable occupation for the child's mind.

At present most of the children admitted are recommended by the Medical Officers in charge of the Infant Welfare Centres for medical reasons. The majority of the children are under-nourished and many show signs of rickets. Orthopædic conditions such as knock knees, bow legs and flat feet are given the necessary treatment at the School by a masseuse, who attends once a week. A Health Visitor is in attendance daily for the purpose of treating minor ailments and weighing and measuring the children. She also assists the Medical Officer who attends weekly, the children receiving a medical examination at regular intervals. Any special cases, such as absentees, or those requiring medical attention, are visited at home by the Health Visitor, and mothers are encouraged to see the Medical Officer at the School regarding their child's health. Children with carious teeth receive treatment at the Dental Clinic. Those requiring medical attention are referred either to their own private practitioners or other remedial agency. Sunlight treatment and cod liver oil and malt may be given free when necessary.

During 1934 there were 80 admissions to the Nursery School, 49 girls and 31 boys. Three of these, two boys and a girl, stayed at the School for less than a fortnight, and did not receive a medical examination. An analysis of the defects found and the causes of admission of the other 77 children is given in the table below:—

	Boys.	Girls.
Rickets	11	18
Malnutrition	5	5
Bronchitis	3	3
Nervousness	—	8
Anæmia	1	—
Pre-tuberculosis	—	5
Congenital heart disease	1	—
Convalescent after illness	1	—
Chronic Conjunctivitis	1	—
Mental deficiency (for observation)	1	—
Poor home conditions	5	9
Total	29	48

From this table it will be seen that rickets, malnutrition and poor home conditions, all three factors being so closely related, accounts for nearly 70% of the total admissions.

The total number of medical inspections made during 1934 was 156, of which 76 were first inspections on the child's entry to the School. Nine children were referred to the Dental Clinic, and 12 were referred to Preston Royal Infirmary, nine for the removal of enlarged tonsils and adenoids, two for strabismus, and one for chronic otorrhœa.

The work of the masseuse at the School is shown in the following table :—

No. on Register, Dec. 31st, 1933	13
No. of New Cases	12
No. discharged	16
No. remaining on Books	9
Total attendance	268
Maximum number of treatments	14
No. of Sessions	33
Average per Session	8

The completed cases may be classified as follows :—

Flat feet	1
Congenital talipes equino varus	1
Genu valgum	1
Genu Varum	1
Rickets	12

14—SECONDARY SCHOOLS.

The School Medical Service undertakes routine medical and dental inspection for six secondary schools. All pupils are examined on admission and re-inspected annually. The total number of children examined at the Park School, Winckley Square Convent, Lark Hill Convent, the Grammar School and the Catholic College was 1,828. The numbers for 1934 for the Harris Day Junior Technical and Commercial School were included in the 1933 Report, so are omitted from this present one.

The majority of defects found were simple; 152 came under the category of Eye Diseases, chiefly defective vision, and 71 had Nose and Throat Diseases, chiefly enlarged tonsils. A few post-rheumatic diseased hearts were discovered. This is of considerable importance in these schools, as the physical training and outdoor games syllabus, while so beneficial to the mass of the children, may be injurious to these isolated heart cases, and might cause a total breakdown in health.

Dental defects were unfortunately of very high incidence. Table XXVII of the Appendix gives the particulars of the routine inspections by the School Medical and School Dental Officers.

II.—Following up and Treatment.

Arrangements for following up cases of defect are entirely in the hands of the Principals of the Schools, and the School Medical Service takes no part except that pupils referred for treatment are re-inspected by the School Medical Officers and Dental Surgeons at intervals to see if the necessary treatment has been received.

In cases of necessity, and on the written recommendation of the Principal, arrangements for treatment are made through the various channels of the School Medical Service.

APPENDIX.

Tables I to X are Statistical Tables prepared for the Board of Education.

TABLE I.

Return of Medical Inspections, 1st January to 31st December, 1934.

A.—Routine Medical Inspections.

Number of Inspections in the prescribed Groups :

Entrants	1843
Second Age Group	1673
Third Age Group	1803
Total	5319
Number of other Routine Inspections	1778

B.—Other Inspections.

Number of Special Inspections	4045
Number of Re-Inspections	7530
Total	11575

TABLE II.

Return of Defects found by Medical Inspection in the year ended 31st December, 1934.

DEFECT OR DISEASE.		ROUTINE INSPECTION		SPECIAL INSPECTIONS	
		NO. OF DEFECTS.		NO. OF DEFECTS	
		Requiring Treatment	Requiring to be kept under observation but not requiring Treatment	Requiring Treatment	Requiring to be kept under observation but not requiring Treatment
1		2	3	4	5
Malnutrition		37	...	158	...
Skin	Ringworm, Scalp	1	...	16	...
	,, Body	...	...	15	...
	Scabies	...	...	7	...
	Impetigo	4	...	138	...
	Other Diseases(non-tubercular)	14	...	161	...
Eye	Blepharitis	35	2	32	...
	Conjunctivitis	4	...	47	...
	Keratitis	...	...	...	...
	Corneal Opacities	...	...	...	...
	Defective Vision (excluding Squint	428	60	87	... 3
	Squint	24	4	17	...
	Other Conditions	9	...	38	...
Ear	Defective Hearing	10	...	35	...
	Otitis Media	27	1	205	...
	Other Ear Diseases	1	...	141	...
Nose and Throat	Chronic Tonsillitis only	387	380	128	23
	Adenoids only	2	3	10	...
	Chronic Tonsillitis & Adenoids	34	10	87	3
	Other Conditions	6	14	303	...

Enlarged Cervical Glands (non-tubercular)		42	53	159	3
Defective Speech		4	...	1	...
Heart and Circulation	Heart Disease—				
	Organic	6	...	34	1
	Functional	40	47	16	6
	Anæmia	69	19	38	...
Lungs	Bronchitis	57	49	191	...
	Other non-tubercular Diseases	3	2	144	...
Tuberculosis	Pulmonary—				
	Definite	1	...	6	...
	Suspected	4	...	4	...
	Non-Pulmonary—				
	Glands	2	...	8	...
	Bones and Joints	...	...	1	...
	Skin	...	...	...	...
	Other Forms	...	...	4	...
Nervous System	Epilepsy	1	...	...	...
	Chorea	3	...	18	...
	Other Conditions	2	2	15	...
Deformities	Rickets	1	...	1	...
	Spinal Curvature	5	2	4	...
	Other Forms	21	5	42	...
Other Defects and Diseases (excluding Uncleanliness and Dental Diseases)		23	3	1562	...

TABLE III.

Return of all Exceptional Children in the Area.

CHILDREN SUFFERING FROM MULTIPLE DEFECTS.

Children suffering from any combination of the following types of defect :—

Total Blindness ... ... Total Deafness ... ... Mental Defect ... ... Epilepsy ... ... Active Tuberculosis ... ... Crippling (as defined in the penultimate category of the Table Heart Disease	14

BLIND CHILDREN.

A blind child is a child who is too blind to be able to read the ordinary school books used by children.

Entered in this Section are children who are so blind that they can only be appropriately taught in a school for blind children.

At Certified Schools for the Blind	At Public Elementary Schools	At Other Institutions	At no School or Institution	Total
6	...	...	...	6

PARTIALLY SIGHTED CHILDREN.

Entered in this Section are children who, though they cannot read ordinary school books or cannot read them without injury to their eyesight, have such power of vision that they can appropriately be taught in a school for the partially blind.

Children who are able by means of suitable glasses to read the ordinary school books used by children without fatigue or injury to their vision are not included in this Table.

At Certified Schools for the Blind	At Certified Schools for the Partially Blind	At Public Elementary Schools	At other Institutions	At no School or Institution	Total
9	...	...	...	...	9

TABLE III.—*continued.*

DEAF CHILDREN.

A deaf child is a child who is too deaf to be taught in a class of hearing children in an Elementary School.

Entered in this Section are children who are so deaf that they can only be appropriately taught in a school for the deaf.

At Certified Schools for the Deaf	At Public Elementary Schools	At other Institutions	At no School or Institution	Total
9	5	...	...	14

PARTIALLY DEAF CHILDREN.

Entered in this Section are children who can only appropriately be taught in a school for the partially deaf.

At Certified Schools for the Deaf	At Certified Schools for the Partially Deaf	At Public Elementary Schools	At other Institutions	At no School or Institution	Total
...	...	...	...	...	...

MENTALLY DEFECTIVE CHILDREN.

FEEBLE-MINDED CHILDREN.

Mentally Defective children are children who, not being imbecile and not being mentally dull or backward, are incapable by reason of mental defect of receiving proper benefit from the instruction in the ordinary Public Elementary Schools but are not incapable by reason of that defect of receiving benefit from instruction in Special Schools for mentally defective children.

This category includes only those children for whose education and maintenance the Local Authority are responsible, and excludes all children who have been notified to the Local Authority under the Mental Deficiency Act.

At Certified Schools for Mentally Defective Children	At Public Elementary Schools	At other Institutions	At no School or Institution	Total
90	13	2	40	145

TABLE III.—*continued.*

EPILEPTIC CHILDREN.

Children Suffering from Severe Epilepsy.

In this part of the Table only those children are included who are epileptic within the meaning of the Act, *i.e.*, children who, not being idiots or imbeciles, are unfit by reason of severe epilepsy to attend the ordinary Public Elementary Schools.

At Certified Special Schools	At Public Elementary Schools	At other Institutions	At no School or Institution	Total
2	...	...	3	5

PHYSICALLY DEFECTIVE CHILDREN.

Physically Defective children are children who, by reason of physical defect, are incapable of receiving proper benefit from the instruction in the ordinary Public Elementary Schools, but are not incapable by reason of that defect of receiving benefit from instruction in Special Schools for physically defective children.

A.—Tuberculous Children.

In this category are placed only cases diagnosed as tuberculous and requiring treatment for tuberculosis at a sanatorium, a dispensary, or elsewhere. Children suffering from crippling due to tuberculosis which is regarded as being no longer in need of treatment are recorded as crippled children, provided that the degree of crippling is such as to interfere materially with a child's normal mode of life. All other cases of tuberculosis regarded as being no longer in need of treatment are recorded as delicate children.

I.—Children Suffering from Pulmonary Tuberculosis.

(Including pleura and intra-thoracic glands.)

At Certified Special Schools	At Public Elementary Schools	At other Institutions	At no School or Institution	Total
...	...	8	7	15

TABLE III.—*continued.*

II.—CHILDREN SUFFERING FROM NON-PULMONARY TUBERCULOSIS.

(This category includes tuberculosis of all sites other than those shown in I).

At Certified Special Schools	At Public Elementary Schools	At other Institutions	At no School or Institution	Total
8	16	14	2	40

B.—DELICATE CHILDREN.

This Section is confined to children (except those included in other groups) whose general health renders it desirable that they should be specially selected for admission to an Open Air School.

At Certified Special Schools	At Public Elementary Schools	At other Institutions	At no School or Institution	Total
110	44	...	...	154

C.—CRIPPLED CHILDREN.

This section is confined to children (other than those diagnosed as tuberculous and in need of treatment for that disease) who are suffering from a degree of crippling sufficiently severe to interfere materially with a child's normal mode of life, *i.e.*, children who, generally speaking, are unable to take part, in any complete sense, in physical exercises or games or such activities of the School curriculum as gardening or forms of handwork usually engaged in by other children.

At Certified Special Schools	At Public Elementary Schools	At other Institutions	At no School or Institution	Total
3	40	5	15	63

TABLE III.—*continued.*

D.—CHILDREN WITH HEART DISEASE.

This Section is confined to children whose defect is so severe as to necessitate the provision of educational facilities other than those of the Public Elementary School.

At Certified Special Schools	At Public Elementary Schools	At other Institutions	At no School or Institution	Total
9	...	...	8	17

TABLE IV.

Number of individual children found at routine medical inspection to require treatment (excluding Uncleanliness and Dental Diseases).

Group	Number of Children		Percentage of Children found to require Treatment
	Inspected	Found to require Treatment	
(1)	(2)	(3)	(4)
Code Groups :			
Entrants	1843	179	9·7
Second Age Group	1673	367	21·9
Third Age Group	1803	272	15·1
Total (Prescribed Groups)	5319	818	15·3
Other Routine Inspections (School leavers).	1778	263	14·7

TABLE V.

Return of Defects treated during the year ended 31st December, 1934.

GROUP I.—Minor Ailments (excluding Uncleanliness, for which see Group VI).

Disease or Defect.	Number of defects treated, or under treatment during the year.		
	Under the Authority's Scheme.	Otherwise.	Total.
(1)	(2)	(3)	(4)
Skin—			
Ringworm—Scalp :—			
(i) X-Ray Treatment ...	4	...	4
(ii) Other	31	...	31
Ringworm—Body ...	21	1	22
Scabies	4	...	4
Impetigo	746	1	747
Other Skin Disease	69	1	70
Minor Eye Defects— External and other, but excluding cases falling in Group II.	418	...	418
Minor Ear Defects	505	9	514
Miscellaneous (*e.g.*, Minor Injuries, Bruises, Sores, Chilblains, etc.)	4033	16	4049
TOTAL	5831	28	5859

TABLE VI.

GROUP II.—Defective Vision and Squint (excluding Minor Eye Defects treated as Minor Ailments—Group I).

Defect or Disease	Number of Defects dealt with.			Number of children for whom spectacles were			
				Prescribed (1)		Obtained (2)	
(1)	Under the Authority's Scheme (2)	Otherwise (4)	Total (5)	(i) Under the Authority's Scheme	(ii) Otherwise	(i) Under the Authority's Scheme	(ii) Otherwise
Errors of Refraction (including squint) ...	...	...	...				
Other Defect or Disease of the Eyes (excluding those recorded in Group I.) ...	923	11	934	698	11	639	11
Total	923	11	934				

TABLE VII.

GROUP III.—Treatment of Defects of Nose and Throat.

NUMBER OF DEFECTS													
Received Operative Treatment.												Received other forms of Treatment (4)	Total number treated (5)
Under the Authority's Scheme, in Clinic or Hospital (1)				By Private Practitioner or Hospital, apart from the Authority's Scheme (2)				Total (3)					
(i)	(ii)	(iii)	(iv)	(i)	(ii)	(iii)	(iv)	(i)	(ii)	(iii)	(iv)		
1	1	439	...	...	...	8	...	1	1	447	...	129	578

(i) Tonsils only. (ii) Adenoids only. (iii) Tonsils and Adenoids.
(iv) Other defects of the nose and throat.

TABLE VIII.

GROUP IV.—Orthopædic and Postural Defects.

	Under the Authority's Scheme (1)			Otherwise (2)			Total number treated
	Residential treatment with education (i)	Residential treatment without education (ii)	Non-residential treatment at an orthopaedic clinic (iii)	Residential treatment with education (i)	Residential treatment without education (ii)	Non-residential treatment at an orthopaedic clinic (iii)	
Number of children treated ...	15	9	208	...	...	...	208

TABLE IX.

GROUP V.—Dental Defects.

(1) Number of Children who were :—

(a) Inspected by the Dentists :

	Aged :			
Routine Age Groups	5	—	Total	6301
	6	1079		
	7	1140		
	8	1256		
	9	1301		
	10	1396		
	11	26		
	12	39		
	13	36		
	14	26		
	15	2		
Specials ...				3109
Grand Total ...				9410

	Total
(b) Found to require treatment ...	6958
(c) Actually treated ...	5583

(2) Half-days devoted to	Inspection ...	48	Total ...	1218
	Treatment ...	1170		
(3) Attendances made by children for treatment ...				10160
(4) Fillings ...	Permanent Teeth ...	6604	Total ...	6604
	Temporary Teeth ...	—		
(5) Extractions ...	Permanent Teeth ...	1971	Total ...	9414
	Temporary Teeth ...	7443		
(6) Administrations of general anæsthetics for extractions ...				1692
(7) Other operations ...	Permanent Teeth ...	1403	Total ...	1403
	Temporary Teeth ...	—		

TABLE X.

Group VI.—Uncleanliness and Verminous Conditions.

(1) Average number of visits per school made during the year by the School Nurses	3
(2) Total number of examinations of children in the Schools by School Nurses	22958
(3) Number of individual children found unclean	3588
(4) Number of children cleansed under arrangements made by the Local Education Authority	8
(5) Number of cases in which legal proceedings were taken :—	
(*a*) Under the Education Act, 1921	—
(*b*) Under School Attendance Byelaws	—

TABLE XI.

Uncleanliness and Verminous Conditions.

Age	Number exam-ined	Clean		Slight Infection		Moderate Infection		Major Infection	
		No.	%	No.	%	No.	%	No.	%
Infants under 7 years	6220	5222	83·9	452	7·2	482	7·7	64	1·0
7	2225	1818	81·7	197	8·8	183	8·2	27	1·2
8	2343	1939	82·7	190	8·1	186	7·9	28	1·1
9	2456	2029	82·6	231	9·4	170	6·9	26	1·0
10	2600	2198	84·5	219	8·4	157	6·0	26	1·0
11	2574	2203	85·5	204	7·9	149	5·7	18	·6
12 andover	4540	3961	87·2	361	7·9	195	4·2	23	·5
All ages									
1934	22958*	19370	84·3	1854	8·0	1522	6·6	212	·9
1933	24044	19638	81·6	2235	9·3	1786	7·4	385	1·6
1932	25478	20158	79·1	2640	10·3	2314	9·0	366	1·4
1931	25780	19065	74·0	3309	12·8	3123	12·1	283	1·1
1930	25179	18926	75·1	3142	12·5	2879	11·4	232	0·9
1929	24780	18183	73·4	3377	13·6	2917	11·8	303	1·2
1928	22331	16634	74·0	2999	13·4	2367	10·6	331	1·5

TABLE XII.

School Accommodation and Average Attendance.

	Number of Schools	Recognised Accommodation	Average attendance for year ended 31st March, 1934
Church of England ...	17	12344	5652
Roman Catholic	11	9792	6155
Council	10	4900	3255
Nonconformist	5	2289	1548
Total	43	29325	16610

TABLE XIII.

Total number of Children examined (all forms).

Year of Examination...	1934	1933	1932	1931	1930	1929
Entrants	1843	1666	1894	2013	2034	2274
Second Age Group	1673	1738	1855	1859	2162	2236
Third Age Group	1803	2018	1494	1159	1252	1532
School Term Leavers ...	1778	1306	975	1047	439	1062
Special Cases (*a*) Clinic ...	3987	3613	3318	2964	3015	2775
(*b*) School ...	58	58	47	72	132	70
Re-inspections (*a*) Clinic ...	5818	6442	5767	4438	4998	4145
(*b*) School ...	1712	967	2405	2183	2138	2123
Totals	18672	17808	17755	15736	16170	16217

TABLE XIV.

Medical Inspection Clinics.

Defect.	On Books, 1st Jan. 1934.	New Cases.	Dis-charged.	Left on the Books 31st Dec., 1934.
Malnutrition	44	163	171	36
Uncleanliness—Head	...	7	7	...
,, Body	...	...	...	...
Skin Disease	28	336	330	34
Eye	12	187	184	15
Ear	73	383	391	65
Nose and Throat	32	466	455	43
Enlarged Glands	20	156	144	32
Defective Speech	1	2	2	1
Teeth	3	24	24	3
Heart and Circulation ...	26	59	63	22
Lungs	56	340	330	66
Tuberculosis—Pulmonary ...	6	11	12	5
,, Non-Pulmonary	3	11	14	...
Nervous System	21	33	34	20
Deformities	...	44	37	7
Other Defects	111	1546	1548	109
Total	436	3768	3746	458
Clinics : Miller Arcade	188	1719	1729	178
Cuttle Street	103	1053	1093	63
Barlow Street	100	783	706	177
Open-Air School ...	45	213	218	40

Total attendances for the last five years :—

	Miller Arcade Clinic.	Cuttle Street	Barlow Street Clinic.	Open Air School	Nursery School	Total.
1934...	3847	2375	2610	754	...	9586
1933...	4232	2629	2314	687	17	9879
1932...	4089	1940	2354	640	12	9085
1931...	2673	1903	2156	504	14	7250
1930...	4788	...	2779	279	...	7846

TABLE XV.

Minor Ailments Treatment Clinics.

Defect.	On Books, 1st Jan. 1934.	New Cases.	Discharged.	Left on the Books 31st Dec., 1934.
Skin :				
Ringworm, Scalp	3	28	31	...
,, Body	...	22	20	2
Scabies	...	4	3	1
Impetigo	21	726	720	27
Other Skin Diseases	3	67	65	5
Minor Eye Defects :				
External and other, but excluding cases falling in Table IV., Group I.	8	410	396	22
Minor Ear Defects	64	450	442	72
Miscellaneous (*e.g.*, Minor Injuries, Bruises, Sores, Chilblains, etc.)	69	3984	3980	73
Total	168	5691	5657	202
Clinics : Miller Arcade	64	1858	1868	54
Cuttle Street	35	1589	1552	72
Barlow Street	47	1415	1402	60
Open-Air School	19	466	470	15
Nursery School	3	363	365	1

Total attendances for the last five years :—

	Miller Arcade	Cuttle Street	Barlow Street	Open Air School	Nursery School	Total
1934	17695	11933	9356	9799	2470	51253
1933	19954	12838	9107	7414	1998	51311
1932	22506	13359	10695	7120	1623	55303
1931	18395	13455	9769	5793	127	47539
1930	28280	...	11813	4692	...	44785

TABLE XVI.

Tonsils and Adenoids.

Number of Defects found at Routine Inspections.

	No. examined	No. referred for treatment	%	No. referred for observation	%
Entrants—Boys ...	926	70	7·5	84	9·0
Girls ...	917	52	5·6	83	9·0
Second Age Group–Boys	813	75	9·2	49	6·0
Girls	860	96	11·1	48	5·5
Third Age Group—Boys	921	31	3·3	69	7·4
Girls	882	41	4·6	60	6·7
Totals	5319	365	6·8	393	7·3

TABLE XVII.

Defective Vision and/or Squint.

Number of Defects found.

	Routine Medical Inspection.					
	No. examined		No. referred for treatment		Percentage referred	
	1933	1934	1933	1934	1933	1934
Second Age Group—Boys ...	877	813	82	87	9·3	10·7
(aged 8—9) Girls ...	861	860	94	92	10·9	10·6
Third Age Group—Boys	980	921	103	73	10·5	7·9
(aged 12) Girls	1038	882	101	63	9·7	7·1

Work of the Refraction Clinic.

	1931	1932	1933	1934
No. of Sessions	128	129	137	130
Total No. of Refractions carried out ...	959	1000	1048	923
Total No. of Prescriptions given	680	801	811	698
Total Attendances	2708	3041	3267	2908
Average Attendance per Session	21·1	23·6	23·8	22·4

TABLE XVIII.

Summary of the Work of the Dental Surgeons.

For the Period January 1st to December 31st, 1934.

ROUTINE GROUPS.

SCHOOLS VISITED	Number of Children Examined at School	No Treatment required	Number requiring Treatment	Number accepted Treatment	Number refused Treatment	Own Dentist	Particulars of Attendances and Treatment at Dental Clinic.								
							Number attended Clinic	No. of Actual Attendances at Clinic	Number Re-treated	No. of Extractions.		No of Gas Administrations.	No. of Stoppings	No. of Dressings	No. of Scalings
										T.	P.				
Frenchwood C. Junior	...	...	...	...	...	...	...	4	...	...	1	...	4	...	...
St. Thomas'	...	...	...	...	...	...	28	45	5	85	2	2	32	3	...
St. Ignatius'	...	...	...	...	...	...	8	23	...	19	1	1	22	1	...
Emmanuel	...	...	...	...	...	...	5	14	...	3	...	...	15	2	...
Moor Park Methodist ...	...	...	...	...	...	...	23	108	2	91	15	11	96	7	...
Christ Church	...	...	...	...	...	...	82	215	29	164	28	19	280	20	...
St. Augustine's	...	...	...	...	...	...	3	15	...	6	7	3	13	4	...
St. Saviour's	...	...	...	...	...	...	26	80	3	74	8	15	84	21	...
Blessed Sacrament ...	...	...	...	...	...	...	64	152	14	104	20	22	209	26	1
St. Paul's	106	39	67	54	12	1	51	137	3	149	12	30	150	29	1
English Martyrs' Boys	134	34	100	65	35	...	191	475	24	219	27	26	502	15	1
St. Matthew's	400	191	209	136	70	3	124	371	18	361	25	68	472	66	...
Trinity C. Junr. ...	187	39	148	112	35	1	112	196	10	210	28	20	219	19	...
Eldon Street Council ...	161	52	109	68	40	1	68	164	18	75	5	3	183	8	...
St. Mary's C.E.	149	71	78	52	25	1	52	131	10	126	15	26	155	28	...
St. Wilfrid's	61	14	47	37	8	2	37	73	5	78	3	2	101	1	...
St. Peter's	116	26	90	59	29	2	57	87	3	134	15	12	95	8	...
St. Cuthbert's	55	29	26	20	5	1	17	32	...	22	...	...	33	...	...
Roebuck St. Council ...	245	71	174	121	44	9	121	293	33	147	14	13	294	9	3
Deepdale Council ...	366	120	246	159	73	14	159	399	34	369	38	72	481	42	...
St. Mary's R.C. ...	116	13	103	77	24	2	72	131	10	129	7	8	175	7	...
Ropers'	48	3	45	34	11	...	34	74	7	36	16	10	84	11	...

St. Stephen's	126	20	106	74	25	7	69	137	11	69	22	13	152	17	...
St. Gregory's	187	80	107	81	23	3	80	184	14	90	8	7	187	6	...
Open-Air " B " ...	81	3	78	46	32	...	45	85	24	15	29	18	76	10	...
St. Joseph's	607	296	311	196	112	3	189	494	48	427	71	106	439	95	1
St. James'	53	15	38	31	7	...	30	62	11	41	1	1	58	...	...
Open-Air "A"	131	36	95	52	43	...	30	58	12	9	8	8	61	1	...
Talbot	404	122	282	195	73	14	188	360	44	137	61	35	367	23	...
St. Matthew's Branch ...	64	39	25	13	12	...	12	29	1	35	...	6	33	1	...
St. Luke's	253	102	151	86	62	3	83	149	16	146	30	31	147	21	...
Parish	68	36	32	23	8	1	20	37	4	14	2	4	35	1	...
St. Jude's	83	53	30	18	12	...	18	33	7	17	...	...	31	2	...
St. Mary's St. Methodist	138	62	76	46	25	5	44	83	12	84	6	16	75	28	...
St. Saviour's	103	47	56	29	23	4	26	41	19	28	9	4	36	20	...
St. Ignatius'	443	215	228	179	44	5	49	119	27	40	10	13	148	2	...
St. Mark's	102	39	63	41	21	1	38	69	9	17	5	3	77	6	...
Hincksman Mem. Meth.	99	53	46	31	11	4	31	45	5	7	1	1	52	2	...
Ribbleton Avenue ...	297	146	151	97	44	10	38	70	7	66	2	11	84	3	...
St. Andrew's	372	144	228	122	80	26	122	238	47	115	5	7	348	4	...
St. Augustine's	385	156	229	167	48	14	28	43	12	47	19	10	36	13	...
Blessed Sacrament ...	161	86	75	54	21	...	...	...	...	...	...	...	...	...	...
	6301	2452	3849	2575	1137	137	2474	5555	558	4005	576	657	6141	582	7

TABLE XIX.

Work of Dental Surgeons.

Children Inspected at the Routine Age Groups during the last five years.

YEAR	AGES														Totals
	4	5	6	7	8	9	10	11	12	13	14	15	16	17	
1934	...	...	1079	1140	1256	1301	1396	26	39	36	26	2	...	...	6301
1933	...	...	697	716	722	827	819	27	24	21	14	1	...	...	3868
1932	...	...	799	856	869	926	980	1053	1068	704	283	4	...	1	7543
1931	...	36	705	796	776	866	907	759	553	62	...	...	...	...	5460
1930	...	...	668	665	664	689	674	403	49	20	1	...	...	...	3833

TABLE XX.

Work of Dental Surgeons.

Percentage of Children requiring treatment in each age group.

YEAR	Aged 6	Aged 7	Aged 8	Aged 9	Aged 10	Aged 11	Aged 12	Aged 13	Aged 14	Aged 15
1934	27·62	55·0	69·82	73·33	70·77	73·08	76·90	86·11	88.46	100·00
1933	33·28	61·45	77·84	80·29	81·68	77·77	87·5	66·66	71·43	100·00
1932	16·5	45·0	68·2	74·5	74·3	74·2	79·7	80·8	86·9	...
1931	41·3	63·7	75·4	80·1	80·0	77·7	82·8	...	...	...
1930	23·3	46·9	55·1	55·1	54·4	57·3	...	...	...	...

TABLE XXI.

Casuals attending Dental Clinic. Particulars and Attendances.

AGES	Number attended Clinic	No. of Actual Attendances at Clinic	No. of Extractions		No. of Gas Administrations	No. of Stoppings	No. of Dressings	No. of Scalings
			T.	P.				
Aged 3	23	30	30	...	...	...	3	...
,, 4	201	212	263	...	...	...	34	...
,, 5	344	370	513	...	16	3	81	...
,, 6	380	436	569	8	38	25	68	...
,, 7	347	429	615	30	53	13	65	...
,, 8	257	371	413	73	65	37	80	...
,, 9	245	352	324	70	61	30	51	2
,, 10	249	417	281	125	103	52	79	1
,, 11	279	497	206	216	140	94	98	1
,, 12	321	556	148	314	208	60	87	...
,, 13	396	815	71	495	308	134	142	4
,, 14	66	117	5	63	42	15	15	...
,, 15	1	3	...	1	1	...	2	...
Total Casuals	3109	4605	3438	1395	1035	463	805	8
Corresponding numbers in :								
1933	3418	5179	4492	1227	1091	906	1249	4
1932	3460	4791	3808	1074	868	798	943	13
1931	3568	4667	3693	1154	839	732	631	1
1930	3124	3798	4310		699	344	881	10
1929	2318	2870	3294		620	163	626	6

TABLE XXII.

Work of Dental Surgeons.

Summary of the Work carried out during the last ten years.

YEAR	Number of Children Examined	No Treatment required	Number requiring Treatment	Number accepted Treatment	Number refused Treatment	Own Dentist	PARTICULARS OF ATTENDANCES AND WORK AT DENTAL CLINIC.						
							Number attended Clinic	No. of Actual Attendances at Clinic	No. of Extractions	No. of Gas Administrations.	No. of Stoppings	No. of Dressings	No. of Scalings
1934 Routine Groups ...	6301	2452	3849	2575	1137	137	2474	5555	4581	657	6141	582	8
Casuals	3109	...	3109	3109	...	...	3109	4605	4833	1035	463	805	8
Total ...	9410	2452	6958	5684	1137	137	5583	10160	9414	1692	6604	1387	16
1933	7286	1234	6052	5319	666	67	5247	10527	9080	1591	7040	2120	24
1932	11003	2567	8436	6289	1932	215	6034	10432	6331	1243	9074	1883	49
1931	9028	1548	7480	6093	1314	73	6070	10335	5170	839	9151	1725	30
1930	6957	2023	4954	4547	316	114	4623	7460	4436	699	6352	2338	37
1929	9084	3711	5373	4665	458	290	4462	7690	3403	620	8023	2091	24
1928	9827	4636	5191	4462	375	396	4095	6646	2830	591	7288	1567	13
1927	7292	2537	4755	4018	408	329	3822	7015	4487	631	10348	1644	8
1926	5817	2230	3587	3034	261	292	2834	6280	1977	434	7735	2777	9
1925	2781	715	2066	1779	53	234	1718	4078	1066	55	4939	1537	44

TABLE XXIII.

Artificial Sunlight Clinic.

Defect	Received Treatment.			Condition on Discharge			Weight on Discharge			Disch. to Hospital, etc.	Failed to Complete Course
	Boys	Girls	Total	Cured	Improved	Stationary	Gained	Stationary	Lost		
Asthma ...	2	2	4	...	2	...	1	1	...	...	...
Anaemia ...	18	8	26	9	12	...	18	3	...	...	7
Alopecia ...	...	6	6	2	1	1	3	1	...	...	...
Abscess ...	1	1	2	1	...	...	...	...	1	...	...
Bronchitis ...	32	15	47	14	12	2	26	1	1	1	8
Blepharitis ...	1	1	2	1	...	...	1	...	...	...	...
Chilblains ...	...	1	1	...	...	...	...	...	...	...	...
Debility ...	35	54	89	31	23	4	49	3	6	...	10
Enl. Glands ...	11	2	13	2	3	1	5	1	...	...	...
Eczema ...	...	...	...	2	...	...	...	2	...	...	...
Malnutrition ...	...	3	3	...	1	...	1	...	...	...	...
Psoriasis ...	...	6	6	1	3	...	4	...	...	...	2
Rickets ...	1	2	3	...	1	...	1	...	...	...	1
Rheumatism ...	1	1	2	1	1	...	2	...	...	...	...
Ringworm ...	6	4	10	9	...	...	2	7	...	...	...
T.B. Glands ...	3	2	5	1	2	...	3	...	...	...	...
T.B. Susp. ...	4	...	4	1	5	...	5	...	1	...	...
TOTALS ...	115	108	223	75	66	8	121	19	9	1	28

TABLE XXIV.

Cases of Infectious Disease reported by Head Teachers.

School.	Scarlet Fever	Measles	Whooping Cough.	Diphtheria.	Chicken Pox.	Mumps.	Ringw'rm Skin Diseases, &c.	Influenza.
Ashton Methodist	2	5	1	...	20	2	...	...
Blessed Sacrament	...	...	...	1	35	7	...	...
Christ Church	...	2	...	...	...	26	...	...
Deepdale Council	7	67	...	1	11	15	...	...
Deepdale Modern	...	...	...	...	...	...	...	...
Eldon Street Council	...	23	...	...	...	...	...	...
Emmanuel	...	35	...	...	8	2	...	...
English Martyrs' Elementary	...	42	1	...	6	19	...	...
Frenchwood Council	1	35	1	1	24	6	...	...
Hincksman Memorial	1	21	2	1	1	10	...	...
Moor Park Methodist	...	28	...	...	1	...	...	...
Open Air School	...	...	...	...	1	9	...	...
Parish Church Junior	...	10	...	...	...	...	...	...
Ribbleton Avenue Council	1	14	...	1	20	11	...	...
Ribbleton Avenue Methodist	...	...	...	...	...	...	...	...
Roebuck Street Council	3	27	1	...	3	2	...	...
Sacred Heart	...	3	...	...	5	...	...	...
St. Andrew's	4	30	...	...	2	1	...	...
St. Augustine's	...	39	15	1	1	31	...	...
St. Cuthbert's	...	7	...	...	1	...	...	5
St. Gregory's	...	...	...	...	...	...	...	...
St. Ignatius	1	60	1	2	7	47	...	...
St. James'	...	1	...	...	...	...	...	...
St. Joseph's	...	...	...	...	...	...	...	...
St. Jude's	...	17	1	3	8	20	...	...
St. Luke's	2	31	...	1	1	21	...	...
St. Mark's	1	26	...	...	...	16	...	...
St. Mary's C. of E.	1	26	1	3	20	24	...	...
St. Mary's R.C.	...	31	...	...	3	37	...	...
St. Mary's Street Methodist	...	30	...	1	1	3	...	...
St. Matthew's	...	22	1	...	...	1	...	...
St. Matthew's Branch	1	1	...	...	3	3	...	...
St. Michael's	...	10	1	...	5	18	...	1
St. Paul's	...	15	...	1	...	15	...	...
St. Peter's	2	21	4	1	2	4	...	...
St. Saviour's	1	27	...	...	1	...	...	...
St. Stephen's	2	20	...	...	1	...	...	...
St. Thomas's	1	17	4	3	...	...	...	...
St. Wilfrid's	...	12	...	...	...	...	...	...
Stoneygate Nursery	...	2	...	...	1	...	...	...
Talbot	1	42	5	...	25	...	...	...
Trinity Council	4	28	...	...	27	...	...	...
Greenland Council Junior	1	...	...	...	...	...	...	...
	37	827	39	21	244	350	...	6
Secondary Schools.								
Park Secondary School	...	...	...	...	7	...	...	...

TABLE XXV.

Home Visiting by Nurses. Visits and Re-visits.

Visit	Tonsils & Adenoids	Vision & Squint	Bron-chitis	Cardiac Defects	Eye Diseases	Skin Diseases	Enlarged Glands	Ear Diseases	Dental Defects	Unclean-liness	Miscell-aneous	Total
1st	774	620	30	24	16	...	2	17	1892	1546	157	5078
2nd	198	164	1	2	1	...	...	...	35	15	2	418
3rd	72	47	...	2	...	...	...	...	11	...	1	133
4th	48	22	...	...	...	...	...	...	6	...	...	76
5th	20	17	...	...	...	...	...	...	6	...	...	43
6th	13	10	...	...	...	...	...	...	3	...	...	26
7th	5	2	...	...	...	...	...	...	...	...	...	7
8th	5	3	...	...	...	...	...	...	...	...	...	8
9th	4	3	...	...	...	...	...	...	...	...	...	7
10th	1	2	...	...	...	...	...	...	...	...	...	3
11th	...	1	...	...	...	...	...	...	...	...	...	1
12th	...	1	...	...	...	...	...	...	...	...	...	1
Total ...	1140	892	31	28	17	...	2	17	1953	1561	160	5801

TABLE XXVI.

Open Air School, 1934

	Boys	Girls	Total
No. on books, Jan. 1st, 1934	63	67	130
No. admitted during year	48	34	82
No. discharged during year	36	42	78
No. on books, 31st Dec., 1934	75	59	134
Average No. on roll	77·6	71·6	149·27
Average attendance	65·3	59·4	124·81
Average period of attendance of those discharged in 1934	1 year 10 mths	1 year 8·8 mths	1 year 9·4 mths

Analysis of Reasons for Admissions.

Disease	Boys	Girls	Total
Anæmia	4	2	6
Bronchitis	11	3	14
Cardiac Disease	1	5	6
Chorea	...	3	3
Debility	16	10	26
Muscular Dystrophy	1	...	1
Cervical Adenitis	1	1	2
Infantile Paralysis	2	...	2
Chronic Laryngitis	...	1	1
Malnutrition	5	4	9
Peritonitis (Quiescent Tuberculous)	2	...	2
Lungs (,, ,,)	1	1	2
Lungs (Pre-Tuberculous)	3	...	3
Phlyctenular Conjunctivitis	...	1	1
Petit Mal	...	1	1
Knee (Quiescent Tuberculous)	1	...	1
Spine (,, ,,)	...	2	2
Totals	48	34	82

Analysis of Reasons for Discharge.

Reasons for Discharge.	Boys	Girls	Total
Over school age (14)	7	9	16
Fit to attend former school	22	18	40
Temporarily unfit to attend any school ...	1	3	4
Admitted to Sanatorium	1	1	2
Admitted to Hospital	3	3	6
Transferred to special School	...	1	1
Found unsuitable	1	1	2
Left district	1	6	7
All reasons	36	42	78

TABLE XXVII.

Medical Inspection at Secondary Schools.

Number of children examined.

Ages	7	8	9	10	11	12	13	14	15	16	17	18	19	Total
Schools Girls :														
Park School	...	...	4	28	84	97	138	89	42	13	11	3	...	509
Winckley Square Convent ...	...	...	1	10	64	59	86	68	45	18	16	6	...	373
Lark Hill Convent	...	...	...	6	17	53	54	35	23	15	8	6	...	217
Boys :														
Grammar School	1	7	5	4	34	68	82	89	57	24	7	3	1	382
Catholic College	...	...	...	7	73	64	68	71	35	17	10	2	...	347
Totals	1	7	10	55	272	341	428	352	202	87	52	20	1	1828

Return of Defects.

Ages	7	8	9	10	11	12	13	14	15	16	17	18	Total Defects
Malnutrition	...	...	...	1	...	2	2	...	...	...	...	...	5
Skin Diseases	...	...	...	...	...	2	...	1	1	...	1	1	6
Eye Diseases	...	1	2	5	23	27	39	32	6	11	5	1	152
Ear Diseases	...	...	...	...	...	...	...	1	...	...	...	...	1
Nose and Throat Diseases ...	...	...	1	4	20	11	24	7	2	2	...	...	71
Enl. Cervical Glands ...	...	...	...	...	...	1	2	...	...	...	...	...	3
Defective Speech	...	...	...	...	...	...	...	...	...	...	...	...	...
Dental Defects	...	...	...	11	40	54	89	68	28	9	7	3	309
Heart and Circulation ...	...	...	...	1	...	3	1	1	1	1	4	1	13
Lung Diseases	...	...	...	...	2	2	...	...	...	...	...	...	4
Pulmonary Tuberculosis ...	...	...	...	...	...	...	...	...	...	...	...	...	...
Non-Pulmonary Tuberculosis	...	...	...	...	...	...	...	...	...	...	...	...	...
Nervous Diseases	...	...	...	...	...	...	...	...	1	...	...	...	1
Deformities	...	...	...	...	...	1	2	1	1	...	...	...	5
Other Defects	...	...	...	...	...	2	3	2	2	...	...	...	9
Total Defects	...	1	3	22	85	105	162	113	42	23	17	6	579

TABLE XXVII.—*continued.*

DEFECTS AS PERCENTAGES OF NUMBERS EXAMINED.

Defect	Park School	Winckley Square Convent School	Lark Hill Convent School	Grammar School	Catholic College	Totals
Malnutrition ...	·9	...	...	...	...	·27
Skin Diseases ...	1·1	...	...	...	...	·32
Eye Diseases ...	6·4	10·7	7·3	8·9	8·3	8·32
Ear Diseases ...	·2	...	...	...	...	·05
Nose and Throat ...	9·2	2·6	1·3	·2	2·8	3·88
Cervical Glands ...	·5	...	...	...	...	·16
Defective Speech ...	...	...	...	...	...	...
Teeth	10·8	45·5	31·8	1·0	3·1	16·90
Heart & Circulation.	1·9	·8	...	...	...	·71
Lungs	·7	...	...	...	...	·21
Tuberculosis ...	...	...	...	...	...	...
Nervous System ...	·2	...	...	...	...	·05
Deformities ...	·7	·2	...	...	...	·27
Other Defects ...	1·7	...	...	...	...	·49
Total defects ...	34·9	60·0	40·5	10·2	14·4	31·67

DENTAL INSPECTION AT SECONDARY SCHOOLS.

	Park School	Winckley Square Convent School	Lark Hill Convent School	Grammar School	Catholic College	Harris Institute Junior & Commercial	Totals
Inspected	396	216	163	313	260	173	1521
No Treatment Required	113	48	37	78	62	30	368
Requiring Treatment ...	283	168	126	235	198	143	1153
Per cent. Requiring Treatment	71·5	77·7	77·3	75·1	76·2	82·7	75·8
Treated at Clinic ...	2	3	1	2	4	1	13
Attendances	2	12	2	12	11	1	40
Extractions—							
Temporary Teeth ...	3	...	...	...	8	...	11
Permanent Teeth ...	...	6	2	4	...	...	12
Gas Administrations ...	...	3	1	3	...	...	7
Fillings	2	15	3	13	17	4	54
Dressings	...	5	...	1	1	...	7
Scalings	...	...	...	...	...	...	...